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CITY OF WAKEFIELD



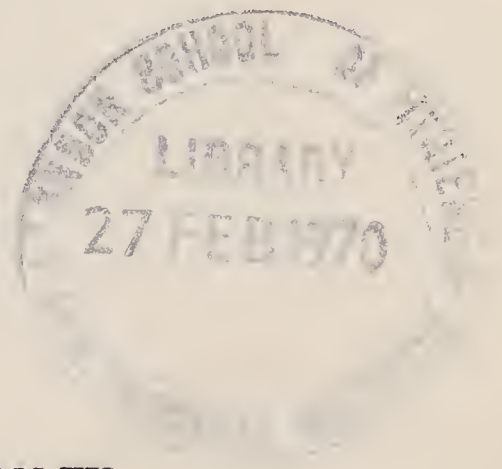
A N N U A L R E P O R T


O F T H E

M E D I C A L O F F I C E R O F H E A L T H

F O R T H E Y E A R

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PUBLIC HEALTH DEPARTMENT,
TOWN HALL CHAMBERS,
KING STREET,
WAKEFIELD.

To the Mayor, Aldermen and Councillors
of the City of Wakefield.

Mr. Mayor, Ladies and Gentlemen,

I have pleasure in presenting my Report of the
health of the City for the year 1967.

I took over the post of Medical Officer of Health
on January 7th, 1967, having been Deputy Medical Officer
of Health for four years. This left the post of Deputy
Medical Officer of Health vacant until it was filled in
July, 1967, by Dr. Denis Reynolds, but prior to him
taking up his duties, some work in Child Welfare Clinics
and Schools was undertaken by General Practitioners on a
sessional basis, and I am indebted to them.

The vital statistics relating to mothers and infants
continued to show the improvement evident in recent years.
The infant mortality rate fell to 15.4 against 16.0 the
previous year, neo-natal mortality fell from 12.8 to
8.8 per 1,000 total live births, and the perinatal
mortality rate reduced to 25.8 per 1,000 total births
compared with 30.42 and 28.0 in the two previous years.
It is also pleasing to note that there were no maternal
deaths due to childbirth during 1967.

These figures can be regarded as satisfactory
particularly as 36% of births are domiciliary, in spite
of the bigger turnover of patients in maternity hospitals
due to the early discharge system. We must try, however,
to improve the rate of hospital confinements, and so
give Wakefield's mothers an equal opportunity with those
living in many areas adjacent to the City of having their
baby in hospital, should they so desire.

Total live births in this city fell again for the
fourth year in succession to 912. The proportion of
illegitimate births, 10.09% was almost the same as last
year. We should ask ourselves whether the increasing

illegitimacy rate could be reduced not by the acceptance of the requirements of the National Health Service Family Planning Act of 1967 designed to give advice, examination and supplies to all who request it, but rather by entering into a programme of intensive health education to youngsters in their final school year.

Some may interpret my suggestion as a condemnation of the 1967 Statute. This is not so, but powerful voices seek to introduce liberalising measures instead of directing attention to the root cause of the problem, which is insecurity amongst many of our young people owing to a complete misunderstanding of social and moral values. Prevention by education is more wholesome to our future generations than a policy of acquiescence which only engenders contempt of the older generations for failing to accept their obligations.

I am sorry to have to report that during 1967 there was a case of the "Battered Baby Syndrome" which occurred in spite of a monthly meeting of the Co-ordinating Committee dealing with families with problems. Prompt treatment saved the baby, who is now in care of the Local Authority. In dealing with this case, co-operation between Departments was of the highest order.

During 1967 there was a proliferation of Child Minders establishing "Play Groups", and at the close of the year we had seven groups within the City. All are registered with the Authority and are subjected to regular inspections.

I am required by the Ministry of Health to comment in this report on three particular aspects, namely:-

- (1) The co-ordination and co-operation with the hospital and family doctor services and information concerning our co-operation with its allied services can be found on pages 17, 18, 21, 25, 28, 29, 31 and 48.
- (2) Progress on the scheme for the notification of congenital defects apparent at birth, and mention is made on page 26.
- (3) Action taken by the Council on the fluoridation of water supplies and in this connection I can add nothing to what I stated in my letter to the last Annual Report.

I cannot let this opportunity pass without commenting upon the high standard of work carried out by all sections of the staff during the past year. It is perhaps not appreciated by some that the Department employs about 210 persons, and the services they perform affect the lives of the majority of our citizens. Some are much in the public eye, others are not, but the whole constitutes a team, each part of which is integral.

In conclusion, I wish to thank the Chairman and Deputy Chairman, Alderman H. S. Grainger and Councillor T. E. Hirst for their ever-ready assistance, and my thanks are extended to all members of the Health Committee for their encouragement and understanding of the many and varied problems facing my staff and myself.

Yours sincerely,

G. FIRTH,
Medical Officer of Health

HEALTH COMMITTEE, 1967

Chairman: Alderman H. S. Grainger
 Deputy Chairman: Councillor T. E. Hirst
 The Mayor: Councillor G. H. Stead, J.P.

Alderman J. H. Taylor	Alderman R. Wheeler, M.B.E., J.P.
Councillor J. Dunford	Councillor W. F. J. Hannaford
Councillor J. Howarth	Councillor J. W. S. Howarth
Councillor F. A. Kilburn	Councillor Mrs. J. E. Senior, J.P.
Councillor J. G. K. Wildie	

Non-Council Members Appointed upon Nomination from
 other bodies:

Nominating Body

Mr. D. J. Watson	National Health Service, Wakefield Executive Council
Dr. E. Norton	Wakefield Local Medical Committee
Mrs. F. Tyas	Hospital Management Committee, No. 9, Wakefield "A" Group
H. Packer, Esq., J.P.	Hospital Management Committee, No. 10, Wakefield "B" Group

HEALTH DEPARTMENT STAFF, 1967

Medical Officer of Health and Principal School

Medical Officer:-

GEORGE FIRTH, M.B., CH.B., D.P.H. (from 7.1.67)

Public Health Department, Town Hall Chambers,
King Street, Wakefield.

Telephone Number - Office, Wakefield 75157

Deputy Medical Officer of Health and Deputy

Principal School Medical Officer:-

GEORGE FIRTH, M.B., CH.B., D.P.H. (to 6.1.67)

DENIS BUCKLEY REYNOLDS, M.R.C.S., L.R.C.P.,
D.P.H. (commenced 17.7.67)

Assistant Medical Officer:-

D. E. TOAL, M.B., CH.B.

Principal School Dental Officer:-

R. E. WHITTAM, L.D.S., R.C.S. (Eng.)

Dental Officer to Ante-Natal Clinics (part-time):-

A. V. D. BUTLER, L.D.S.

Public Analyst:-

R.A. DALLEY, F.R.I.C.

Chest Physicians (part-time):-

J. K. SCOTT, M.B., M.R.C.P., D.P.H.

J. VINER, M.B., CH.B.

Chief Public Health Inspector:-

W. B. TWYFORD, (X)

Deputy Chief Public Health Inspector:-

A. BARKER, (X)

District Public Health Inspectors and Inspectors
of Meat and Other Foods:-

B. FOX (✱)
G. HEPWORTH
J. D. HILL
A. S. KIRKWOOD (commenced 21.8.67)
R. MURGATROYD
D. POWERS (✱)
S. S. SPURR
S. WHEATER (resigned 15.6.67)
J. A. WINTERBURN

Trainee Public Health Inspectors:-

MISS D. KEIGHLEY
D. PERKIN
J. S. SMITH

(✱) Certificate of the Royal Society of Health
for Smoke Inspectors.

Superintendent Nursing Officer and Superintendent
Midwife:-

MRS. A. WARD, S.R.N., S.C.M., H.V. CERT.

Health Visiting Staff:-

MRS. C. ARBLASTER, S.R.N., S.C.M., (Part I), (H.V. CERT).
MRS. I. ARMSTRONG, S.R.N., S.C.M., H.V. CERT.
(Commenced 13.11.67).
MISS M. D. CLARK, S.R.N., S.C.M., H.V. CERT.
MRS. E. G. CLIFFORD, S.R.N., S.C.M., H.V. CERT.
(Resigned 31.5.67).
MRS. F. R. CRABB, S.R.N., S.C.M., H.V. CERT.
(Commenced 4.9.67).
MRS. I. GRAZIER, S.R.N., S.C.M., H.V. CERT.
MRS. A. INMAN, S.R.N., S.C.M. (Part 1), H.V. CERT.
(Commenced 18.9.67).
MRS. J. MACDERMOTT, S.R.N., S.C.M. (Part 1), H.V. CERT.
(Resigned 16.6.67).
MRS. A. MARSHALL, (✱) S.R.N., S.C.M., H.V. CERT.
(Resigned 30.9.67).
MRS. M. P. A. MARSTON, S.R.N., S.C.M., H.V. CERT.
(Resigned 27.10.67).
MRS. B. M. PRASHAR, S.R.N., S.C.M., H.V. CERT.
MRS. A. T. SAUNDERS, S.R.N., S.C.M., H.V. CERT.
MISS M. B. WINSTER, S.R.N., S.C.M., H.V. CERT.
MISS H. E. W. WRIGHT, S.R.N., S.C.M., H.V. CERT.
(from 1.10.67).

(✱) Fieldwork Instructor.

Assistant Health Visitors:-

MRS. J. DOYLE, S.R.N.
 MRS. M. MARTIN, S.R.N., S.C.M.
 MRS. E. TATE, S.R.N. (to 19.11.67).
 MISS H. E. W. WRIGHT, S.R.N., S.C.M. (to 30.9.67).

Home Nurses:-

Senior: MRS. E. WILBY, S.R.N., S.C.M.,
 QUEEN'S NURSE

Full-time:-

MISS L. G. BATTAMS, S.R.N., S.C.M., QUEEN'S NURSE
 MRS. J. BOUGHTON, S.E.N. (commenced 30.1.67).
 MR. F. CALCUTT, S.R.N., O.N.C.
 MRS. F. M. CROSSLAND, S.R.N., O.N.C.
 (commenced 13.11.67).
 MRS. D. HARGREAVES, S.R.N.
 MISS P. A. LEADBEATER, O.N.C., S.R.N., S.C.M.,
 QUEEN'S NURSE
 MRS. I. F. LESLIE, S.R.N., S.C.M.
 MRS. B. McCORMACK, S.R.N.
 MRS. E. TATE, S.R.N. (from 20.11.67).
 MRS. E. WEBSTER, S.R.N. (resigned 5.9.67).
 MRS. I. J. WRAY, S.R.N., O.N.C. (commenced 6.3.67).

Part-time:-

MRS. H. HARROP, S.E.N.
 MRS. E. M. HOLLAND, S.R.N., S.C.M., QUEEN'S NURSE
 MRS. V. ORPIN, S.R.N., QUEEN'S NURSE
 (resigned 7.11.67)

Midwives:-

MRS. B. CLARKE, S.R.N., S.C.M.
 MRS. B. CROWTHER, S.R.N., S.C.M.
 MRS. V. HALL, S.C.M.
 MRS. B. HARRISON, S.C.M. (commenced 9.1.67).
 MISS S. C. HOPLEY, S.R.N., S.C.M.
 MRS. S. GAUNT, S.R.N., S.C.M.
 MISS I. LESSONS, S.R.N., S.C.M. (Died 21.1.67)
 MRS. C. L. MOLLOY, S.R.N., S.C.M.

School Clinic Nurse:-

MRS. N. V. PARKINSON, S.R.N.

MATRON, Day Nursery:-

MISS E. MOSLEY, S.R.N., R.F.N. (retired 18.9.67).
 MISS M. PINDER, N.N.E.B., NURSERY WARDEN'S CERT.
 (commenced 19.9.67).

Physiotherapist:-

MRS. M. WILSON, M.C.S.P.

Dental Attendant:-

MRS. B. WARD

Domestic Help Organiser:-

MRS. M. POUNDER (resigned 30.4.67)

MRS. M. SANDERSON (commenced 17.7.67)

Venereal Diseases Social Worker (part-time):-

MRS. E. W. COHEN, S.R.N., S.C.M., H.V. CERT.,
QUEEN'S NURSE

Supervisor, Training Centre:-

MRS. P. M. VOGELER

Warden, Stoneville Hostel:-

MRS. J. JACKSON

Ambulance Officer:-

M. G. MOUNTAIN

Mental Welfare Officers:-

J. P. GRAINGER, S.R.N., R.M.P.A. - Senior.

C. ROBINSON

Assistant Mental Welfare Officer:-

MRS. F. APPS

Chief Administrative Assistant:-

G. F. BAUME

Administrative Assistant:-

J. CHARLESWORTH

Clerical Staff:-

MISS L. M. AMBLER (commenced 4.9.67)

MISS A. ARMITAGE

MRS. A. COWGILL (resigned 3.9.67)

G. S. COWGILL

MISS S. CREWE

MRS. J. M. GIBSON

MRS. E. MOUTREY

M. R. OLIVER

MRS. J. PETERS (commenced 6.2.67)

MRS. V. SATTERSFITT

MRS. B. SUGGITT

MISS J. THORNER

MISS H. VAUSE

MR. G. WATSON (resigned 14.12.67)

MISS J. J. WILSON

MRS. D. WOOD

MRS. P. WOOD, A.S.T.C. (Secretary to M.O.H.)

PART I

SOCIAL AND STATISTICAL INFORMATION

SOCIAL CONDITIONS

VITAL STATISTICS

PART I

SOCIAL AND STATISTICAL INFORMATION

1.	Area of County Borough	5,801 acres
2.	Population (a) Census 1961.. .. .	61,268
	(b) Registrar General	
	Mid-Year 1967	60,020
3.	Number of dwelling houses at 31.3.67.	19,750
4.	Density of Population	10.4 per acre
5.	Rateable value at 1.4.67.	£2,347,721
6.	Product of a penny rate 1966/67	
	(a) Gross	£9,486
	(b) Net	£9,408

SOCIAL CONDITIONS

Wakefield is very favourably placed as an industrial centre situated as it is in the heart of the West Riding of Yorkshire and the Yorkshire Coalfield; and is served by two main railway lines running roughly north and south and east and west. Wakefield is readily accessible to the A.1 and the London-Yorkshire Motorway is under construction and touches the City Boundary on its way to Leeds, and the planned new motorway west from Hull will join this between Leeds and Wakefield. In addition there is available an up-to-date waterway system by which goods may be quickly and efficiently carried to and from the Humber ports.

Some 81 different industries operate in Wakefield, which is undoubtedly unique for a town of its size, and this diversity of industry is a welcome guarantee for the future.

VITAL STATISTICS

<u>Live Births</u>	<u>1967</u>	<u>1966</u>	<u>1965</u>
Legitimate - Male	407	443	450
Female.. .. .	413	402	454
Illegitimate - Male.. .. .	43	55	34
Female.. .. .	49	39	38
Total...	912	939	976
Birth rate per 1,000 population.	15.2	15.6	16.2
Birth rate adjusted by application of comparability factor	15.5	16.0	16.6
Birth rate per 1,000 population (England and Wales)... .. .	17.2	17.7	18.0
Illegitimate live births per cent of Total live births. .	10.09%	10.01%	7.38%

Still Births

	<u>1967</u>	<u>1966</u>	<u>1965</u>
Legitimate - Male	4	6	9
Female	10	5	15
Illegitimate - Male	3	-	-
Female	-	3	1
Total	<u>17</u>	<u>14</u>	<u>25</u>

Rate per 1,000 total births (live and still)	18.0	14.7	25.0
Rate per 1,000 total births (live and still) in England and Wales . . .	14.8	15.4	15.7
Total live and still births	939	953	1001

Infant Mortality

Infant deaths under 1 year of age . . .	14	15	19
Total infant deaths per 1,000 total live births	15.4	16.0	19.5
Legitimate infant deaths per 1,000 legitimate live births	15.9	16.6	21.0
Illegitimate infant deaths per 1,000 illegitimate live births	10.9	10.6	00.0
Infant deaths per 1,000 total live births (England and Wales)	18.3	19.0	19.0

Neo-Natal Mortality

Deaths under 4 weeks per 1,000 total live births	8.8	12.8	13.3
Deaths under 1 week per 1,000 total live births	7.7	11.7	13.3

Perinatal Mortality

Stillbirths and deaths under 1 week combined per 1,000 total live and stillbirths	25.8	30.4	28.0
---	------	------	------

Maternal Mortality (including Abortion)

Number of Deaths	-	3	-
Rate per 1,000 total live and stillbirths	0.0	3.1	0.0

Deaths

Males	427	416	418
Females	367	432	389
Crude death rate per 1,000 population	13.2	14.1	13.4
Death rate adjusted by application of comparability factor	13.7	12.7	12.6
Death rate per 1,000 population (England and Wales)	11.2	11.7	11.5

A detailed statement of the number of deaths attributable to each of the causes is shown in Table I. The age group at death, sex, is also shown in this table.

A brief summary of these deaths according to a generalised classification is as follows:-

<u>Classification</u>	<u>1967</u>	<u>1966</u>	<u>1965</u>
Tuberculosis (all sites)	-	1	2
All other infectious conditions. ...	2	2	1
Diseases of the respiratory system..	127	134	107
Heart and circulatory system	404	456	438
Cancer	150	147	140
All other causes..	111	108	119

VITAL STATISTICS FOR THE LAST TEN YEARS

Year	Population	Births	Birth Rate	Deaths	Death Rate	Infantile Deaths	Infant Death Rate	Perinatal Mortality Rate	Maternal Deaths
1958	59,740	900	15.1	755	12.6	29	32.2	52.2	1
1959	59,860	894	14.9	743	12.4	27	30.2	37.1	-
1960	59,840	934	15.6	811	13.6	28	30.0	38.8	1
1961	60,038	942	15.6	783	12.9	21	22.3	40.4	-
1962	60,560	977	16.1	825	13.6	18	18.4	27.1	-
1963	60,430	910	15.1	875	14.5	25	27.5	28.0	1
1964	60,130	977	16.2	802	13.3	16	16.4	32.2	2
1965	60,100	976	16.2	807	13.4	19	19.5	28.0	-
1966	60,040	939	15.6	848	14.1	15	16.0	30.4	3
1967	60,020	912	15.2	794	13.2	14	15.4	25.8	-

CAUSES OF DEATH, 1967 (continued)

Causes of Death	Sex	Total all Ages	Under 4 weeks	4 weeks and under 1 year	Age in years								
					1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75 & over
10. Malignant Neoplasm, Stomach	M	9									2	5	2
	F	7									1	4	2
11. Malignant Neoplasm, Lung, Bronchus	M	35								3	9	18	5
	F	6								1	1	2	2
12. Malignant Neoplasm, Breast	M	-											
	F	17					1			3	4	4	5
13. Malignant Neoplasm, Uterus	M	-											
	F	4								1	2	-	1
14. Other Malignant & Lymphatic Neoplasms	M	42					1			1	8	14	18
	F	26								3	7	11	5
15. Leukemia, Aleukaemia	M	3				2					1		
	F	1									1		
16. Diabetes	M	-											
	F	7										3	4
17. Vascular Lesions of Nervous System	M	47					1			2	8	15	21
	F	50								1	4	8	37
18. Coronary Disease, Angina	M	106						3		12	23	42	26
	F	62									11	28	23

CAUSES OF DEATH, 1967 (continued)

15 (ii)

Causes of Death	Sex	Total all Ages	Under 4 weeks	4 weeks and under 1 year	Age in years									
					1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75 & over	
19. Hypertension with Heart Disease	M	3								2	1			
	F	10					1					1	8	
20. Other Heart Disease	M	37									2	2	14	21
	F	52								2	5	5	17	28
21. Other Circulatory Diseases	M	21								1	5	8	7	
	F	16										3	13	
22. Influenza	M	1											1	
	F	-												
23. Pneumonia	M	23	1	2		1				2	3	3	10	
	F	36		1						1	2	9	23	
24. Bronchitis	M	43								1	8	17	17	
	F	21									5	7	9	
25. Other Diseases of Respiratory System	M	2							1					
	F	1											1	
26. Ulcer of Stomach and Duodenum	M	4									1			3
	F	2									1		1	
27. Gastritis, Enteritis and Diarrhoea	M	4										1	1	3
	F	6		1							1		4	

CAUSES OF DEATH, 1967 (continued)

Causes of Death	Sex	Total all ages	Under 4 weeks	4 weeks and under 1 year	Age in years									
					1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75 and over	
28. Nephritis and Nephrosis	M	3										1	2	
	F	2										1	1	
29. Hyperplasia of Prostate	M	2											2	
	F	-												
30. Pregnancy, Childbirth and Abortion	M	-												
	F	-												
31. Congenital Malformations	M	3	1	1				1						
	F	4	2	1	1									
32. Other Defined and Ill-defined diseases	M	18	3					1	2	5	4	3		3
	F	27	1					1	3	5	3	14		
33. Motor Vehicle Accidents	M	8			1	1	1					1	1	
	F	1								1				
34. All Other Accidents	M	7			1	1	2					1	1	1
	F	6										1		4
35. Suicide	M	3					2							
	F	2											2	-
36. Homicide and Operations of War	M	2				1				1				
	F	-												
Totals		894	8	6	5	3	5	13	45	132	149	325		

PART II

PERSONAL HEALTH SERVICES
NATIONAL HEALTH SERVICE ACT, 1946

Section 21	Health Centres
" 22	Care of Mothers and Young Children
" 23	Midwifery Service
" 24	Health Visiting
" 25	Home Nursing
" 26	Vaccination and Immunisation
" 27	Ambulance Service
" 28	Prevention of Illness, Care and After-care.
" 29	Home Help Service

Part II

PERSONAL HEALTH SERVICESNATIONAL HEALTH SERVICE ACT, 1946HEALTH CENTRES (Section 21)

No purpose-built Health Centres have been erected and neither are any intended to be built in the foreseeable future.

Accommodation in Child Welfare Centres will continue to be made available to any general practitioner wishing to use it.

CARE OF MOTHERS AND YOUNG CHILDREN (Section 22)Ante-Natal Care

During 1967, 449 expectant mothers paid 1,616 attendances at the Midwives' sessions held at four of the centres in the City where they had the opportunity of being examined by the Midwives they had booked besides giving them the opportunity of discussing their forthcoming confinements. Blood specimens for pathological examination are taken at a special clinic held at the Principal Child Welfare Centre each Wednesday morning. The Domiciliary Midwives also assist general practitioners at clinics held in their surgeries.

Women booked for hospital confinement attend the hospital out-patient clinic.

Relaxation and Mothercraft Classes

In 1967 there were 351 domiciliary births, but only 139 expectant mothers attended any Preparation for Child-birth classes arranged at their area Child Welfare Clinic.

These weekly sessions are carelessly described as Relaxation Classes, but much more than mild gymnastics and the ability to relax is taught. With the co-operation and combined efforts of the physiotherapist, health visitor and midwife, the mother-to-be is instructed in most aspects of antenatal care, practising in detail the controlled active part she plays in her own labour, so that she may be of some help and not a hindrance to herself and her midwife.

The information and advice offered in these weekly classes is of some value to all expectant mothers, particularly to those having a second child, where the service was not offered the first time, with a result that they probably experienced a very trying and frightening labour, completely ignorant of what was happening. A little help and advice may have prevented that.

I do urge all general practitioners concerned with antenatal care to offer this service to every expectant mother, whether it be her first or her second baby, so that she may be given the opportunity to approach her confinement with the same confidence and control exhibited by the majority of those who have attended the classes.

Details of antenatal, relaxation and mothercraft classes are as follows:-

<u>CENTRE</u>	<u>CLINIC</u>	<u>DAY</u>	<u>TIME</u>	<u>P.M.</u>
The Cliffe, Margaret Street	Ante-natal Relaxation & Mothercraft	Friday Friday	Fortnightly Weekly	2-4 2-4
Hall Road, Snapethorpe	Antenatal Relaxation & Mothercraft	Friday Tuesday	Fortnightly Weekly	2-4 2-4
68 Batley Road	Antenatal Relaxation & Mothercraft	Friday Wednesday	Fortnightly Weekly	2-4 2-4
Kettlethorpe Community Centre	Antenatal Relaxation & Mothercraft	Wednesday Monday	Fortnightly Weekly	2-4 2-4

Child Welfare Centres

There are six centres in the City at which weekly clinics are held and the table on the next page indicates the attendances at each of these clinics. There is a Doctor in attendance at each session who, together with the Health Visitor, freely give their advice about child health, care and behaviour.

The Ministry's welfare foods are available and issues of the several commodities are given below. Certain proprietary branded baby foods are also available although in the last 12 months there has been a marked decline in the sales of many brought about by the much lower prices charged by supermarkets. The Health Visitor can do no more than recommend the most appropriate foods, but the ultimate choice rests with the mother and it is understandable that in these days of rising prices she will buy the cheapest, which suggests that the day is coming when baby foods might no longer be available in Child Welfare Centres situated in towns, causing much loss of free advertising to the manufacturers, but with a saving of staffing time.

Issue of Welfare Foods:-

	<u>1967</u>	<u>1966</u>
National Dried Milk	4,022	4,661
Cod Liver Oil	876	947
Vitamin Tablets..	1,147	1,390
Orange Juice	12,943	13,638

In addition, 100 tins of dried milk and 936 bottles of orange juice were issued direct to the maternity hospitals and Day Nursery.

CHILD WELFARE

A summary of the attendances at the various clinics is shown in the following table:-

1. Day of Clinic	(Afternoons weekly)	Thurs.	Thurs.	Mon. & Thurs.	Tues.	Tues.	Wed.	Total	
Batley Road		Boston		East-Moor		Many-gates		Snape-thorpe	Total
2. Number of children who attended during the year and were born in:-		Thurs.		Tues.		Tues.		Wed.	
1967		140	85	146	58	141	128	698	
1966		124	89	151	79	103	113	659	
1965 = 62		133	117	139	40	141	94	664	
3. Total number of children who attended during the year		397	291	436	177	385	335	2021	
4. Total number of attendances during the year made by children who at the date of attendance were under 5 years.		2362	1746	1990	919	2778	2337	12132	

Care of Premature Babies

Arrangements exist with the Regional Hospital Board for the emergency admission of prematurely born infants to a premature baby unit at the Manygates Hospital. An emergency "flying squad" based on the Manygates Hospital serves Wakefield and District. In addition an "Oxygen-
aire" portable incubator is stored and maintained for constant readiness at the Ambulance Depot and used for the transportation from home to hospital of any premature or young baby.

	<u>1967</u>	<u>1966</u>	<u>1965</u>
Number of premature live births			
(a) Born in hospital	42	38	42
(b) Born at home	<u>8</u>	<u>7</u>	<u>10</u>
Total premature live births	<u>50</u>	<u>45</u>	<u>52</u>
Number who died within 24 hours of birth	2	5	7
Number who died between one and seven days	1	-	1
Number who died between seven and twenty- eight days.. ...	0	1	0
Survived 28 days	47	39	44
Number of premature still births.. ...	6	6	19

Day Nursery

In my 1966 Report I made mention of a small Nursery being erected in the grounds of the Principal Child Welfare Centre in Margaret Street. This was opened on Monday, the 27th February, 1967, the Nursery at Burneytops, West Parade, having closed its doors on the previous Friday.

The new Nursery is designed to accommodate twelve children, and consists of two large rooms placed on either side of a small central office designed so that the person within can supervise activities. There is a kitchen, toilets for the children, and facilities for laundering. The Nursery is adjacent and attached by means of a corridor to the Principal Child Welfare Centre.

The staffing of the Nursery consists of a Matron, two Nursery Assistant and two part-time Domestics, one a cook/cleaner and the other a Laundress/general. The sad part of the venture was having to dispense with the services of several staff, some of whom had given considerable service to the Nursery. The transition was made easy by the continuance as Matron of Miss Mosley,

who remained at the Nursery until her retirement on the 18th September, 1967, after a period of 23 years in the employment of the Corporation. She was replaced the following day by Mrs. M. Hewitt.

Owing to the smallness of the Nursery it has been necessary to give priority to certain cases as the demand for places exceeds supply, and first priority is given to children having one parent only, and to those admitted on social/medical grounds. The Health Committee has also agreed to my making available free places in the Nursery to children of married women Health Visitors in an attempt to tempt them to return to work, and this has paid off in dividends.

The aims of the Nursery can be summarised as follows:-

- (1) Ensuring proper physical development of the children through controlled play.
- (2) Ensuring their proper mental development.
- (3) Developing correct feeding habits.
- (4) The education of the mothers by example.

Family Planning

The National Health Service (Family Planning) Act, 1967, received the Royal Assent on the 28th June and gave powers to local health authorities to provide advice on contraception, the medical examination of persons and the supply by prescription or direct of contraceptive substances and appliances. Although the Act made no distinction between the married and the unmarried, and even went so far as to leave open the issue of a minimum age, the Health Committee decided to extend their existing arrangements with the Wakefield and District Family Planning Association, which already provided advice on contraception and supplies in medical cases, to cover persons needing the service on social grounds, but only in the case of married persons.

Nurseries and Child Minders Regulation Act, 1948

Registration under this Act increased considerably in number during the year, culminating in there being seven child-minders providing accommodation for a total of 103 children. Two of the registrations were for women renting accommodation at two of the Child Welfare Centres which provides a useful source of income to the Authority. There is no doubt that Play Groups are needed, and that

they serve a useful function for mothers in the areas in which they have been established. The individuals registered are visited periodically by my staff, and a high standard of care prevails, and I am certain that there are no unregistered premises or persons operating within the City.

Nursing Homes

One Maternity Home is registered under the Public Health Act, 1936.

Orthopaedic Clinic and Ultra Violet Light

Orthopaedic and Ultra Violet Light treatment to children was resumed in 1967 by the appointment of a Physiotherapist who commenced duties the previous December. 71 children paid 875 attendances for orthopaedic treatment and 8 children made a total of 61 attendances for ultra violet light treatment.

Summary of Dental Treatment of Expectant and Nursing Mothers and Children under School Age during 1967

	<u>Children under the age of five years</u>	<u>Expectant and Nursing Mothers</u>
No. of first visits	34	5
No. of subsequent visits...	<u>25</u>	<u>9</u>
Total visits ...	59	14
Treatment provided:-		
Number of fillings	35	2
Teeth filled	33	2
Teeth extracted.	31	21
General anaesthetics given.	18	3
Emergency visits by patients	15	1
Teeth otherwise conserved..	15	-
Number of courses of treatment completed during the year.	27	3

Care of Unmarried Mothers and their Children

The Wakefield Corporation make an annual contribution to the Wakefield Moral Welfare Association, under whose auspices The Haven at Pontefract, a home for unmarried mothers and their children is maintained. Unmarried mothers from the City of Wakefield are normally admitted to this Home to receive care and attention, although on occasions it is necessary to use the Homes of other organisations, voluntary and religious. The Council has agreed to accept financial responsibility for the maintenance of the mother whilst in the Home for

periods of six weeks before and seven weeks after confinement. Any contribution which the girl is able to make reduces the amount of the Corporation's liability.

During 1967, the Corporation accepted financial responsibility for seven unmarried women.

The following report has been submitted by Miss M. E. Mills, the Social Worker to the Wakefield and Pontefract Deaneries Moral Welfare Association, and relates to the activities of the Association during 1967 in relation to residents of Wakefield.

"During the year a total of 118 cases were referred to the Moral Welfare Worker.

36 were from Wakefield City, and the remaining 82 were from the West Riding.

Of the 36 Wakefield City cases:

26 were single girls expecting illegitimate babies;
5 were married women expecting illegitimate babies;
2 were married women expecting legitimate babies
who had separated from their husbands

2 were purely matrimonial cases.

1 was a girl with a baby seeking accommodation.

Their ages varied greatly and were:-

14 years 1	22-24 years 6
15 years 1	25-30 years 3
16-18 years 9	31-35 years 4
19-21 years 8	36-40 years 1

The majority of them chose to have their babies in hospital, as is indicated below:-

25 in hospital
2 admitted to The Haven, Mother and Baby Home
3 admitted to other Mother and Baby Homes.
1 had a home confinement
1 had a domiciliary confinement in another area
1 girl miscarried.

The position of 33 babies born during the year was as follows:-

7 were accepted for adoption
25 returned home with the mother
1 placed in the care of the Church of England Children's Association

I am extremely grateful for the continued co-operation and help of the Medical Officer of Health and his Department".

MIDWIFERY SERVICE (Section 23)

During the year 44 midwives notified their intention to practise, 7 of them being employed by the Local Health Authority and the remainder in maternity hospitals within the City, namely, at Manygates and the County General Hospital. For the first time for a number of years we had a full staff with very little illness, marred only by the death of Miss Ida Lessons on the 21st January after a long illness.

All the domiciliary midwives are trained in the administration of inhalational analgesia and each is provided with her own Entenox gas/oxygen apparatus. All seven are approved teaching midwives and during the year 5 pupils completed their training.

The total number of confinements in the City in 1967 is reflected in the table below, and it is interesting to observe that for the first time since 1948 the number of babies born at home has fallen below 40%, although the hospitals have still some way to move before attaining the desired figure of 70% hospital confinements.

	<u>Domiciliary</u>	<u>Hospital</u>	<u>Total</u>
Total births in City (live and still)	353	2709	3062
Total births (live and still) to residents - adjusted	353	553	906
Total confinements of residents	351	548	899

On the other hand, the number of cases delivered in hospitals but discharged before their 10th day and attended by domiciliary midwives increased by 27% in 1967 compared with the previous year and the figures are indicated below.

	<u>1967</u>	<u>1966</u>
(i) At twenty-four hours	2	12
(ii) On second day	155	158
(iii) On third day	115	55
(iv) On fourth day	52	25
(v) On fifth day	27	14
(vi) Between sixth and ninth day.	105	96
Totals.	456	360

There is no doubt that the majority of women prefer to have their babies in hospital, and this is to be recommended in the case of first babies and confinements

subsequent to the fourth and for women over the age of 35. The increasing number of early discharges tends to relegate the domiciliary midwife to the role of maternity nurse - a position which many are beginning to resent - but the situation will not alter until the legal position is changed to enable a domiciliary midwife to attend her own confinements in hospital. This must come about if the best use is to be made of the declining number of midwives, and to overcome the staffing shortage which is ever present in industrial areas.

Incidence of Congenital Malformations

The scheme that commenced on the 1st January, 1964, to notify to the Registrar General congenital malformations observable at birth resulted in 20 babies, including two still-born, being found to have malformations.

HEALTH VISITING SERVICE (Section 24)

The establishment of health visitors at the end of the year remained at 14 but in common with previous years numbers were constantly fluctuating and our actual establishment fell short of the maximum. A degree of permanency is retained by the number of married women health visitors who have returned to work on a part-time basis, although I have managed to recruit a few by being able to offer accommodation in the Day Nursery for children of health visitors wishing to return to work. This situation is not conducive to a good service as it is so easy for difficulties to arise in exercising the right degree of care of the hundreds of families within the City, many of whom have young mothers in full or part-time employment, or have circumstances wherein the children and the family itself are at constant risk. Vigilance has to be exercised constantly by the health visitors and the Superintendent Nursing Officer to avoid a situation which could result in the break-up of a family or negligence or even cruelty to young children but by and large we are successful.

There are good lines of communication between the Children's Officer, the local Inspector of the N.S.P.C.C., the Director of Welfare Services, and my Department, and this liaison is of considerable benefit to the Department and to the community we serve.

It will probably have been gathered by the discerning reader that a system of priorities has had to be introduced in order to cope with an increasing amount of work by a staff which seldom increases, and this has resulted in selective visiting whereby the health visitors give priority to visiting new babies, problem families, geriatrics and tuberculous patients. Only where the health visitor has time is routine visiting followed, but even here it is possible only to visit babies by a sequence of visiting during their first year of life, namely on the 11th day, then at the age of six weeks, three months, six to nine months, one year, followed by a visit at 18 months to 24 months, and again at 36 months. Seven times in three years seems little enough and yet it suffices for the majority and allows more time for those babies and young children showing problems which are either personal or within their environment.

Of course more is expected of the health visitor now

than in previous years and her function is summarised in the third report (1967) of the Council for the Training of Health Visitors as follows:-

"The health visitor is a nurse with post-registration qualifications who provides a continuing service to families and individuals in the community. Her work has five main aspects:-

- (1) The prevention of mental, physical and emotional ill-health and its consequences.
- (2) The early detection of ill-health and the surveillance of high-risk groups.
- (3) Recognition and identification of need and mobilisation of resources where necessary.
- (4) Health Education.
- (5) Provision of Care. This will include support during periods of stress, and advice and guidance in cases of illness as well as in the care and management of children. The health visitor is not, however, actively engaged in technical nursing procedures".

There is a satisfactory liaison with hospitals with one of the health visitors attending the weekly diabetic clinic at the Clayton Hospital, whilst another works in close consultation with the Geriatrician at the County General Hospital and the health visitors in turn visit the Children's Hospital, Sheffield, by kind invitation of Dr. Lorber, Consultant Paediatrician.

Liaison rather than attachment with general practitioners is practised and this certainly works better than attachment with its inherent problems. The Health Committee in April, 1967, carefully considered the subject following the completion of a six months period of having attached a health visitor to a group practice, and three conclusions were reached, which were:-

- (1) The amount of work carried out by the attached health visitor was less than that of a health visitor working a district.
- (2) The type of cases being dealt with by the attached health visitor differed considerably compared to the district health visitor.
- (3) The district health visitor spent a much greater amount of her time at clinics than did the attached health visitor.

Excluding attention to babies, general practitioners

are now more concerned with those of their patients who are ill, whilst the work of the health visitor is primarily concerned with the prevention of ill-health bringing with it a different content of outlook in work patterns. However, I might have been inclined to recommend the Committee to extend the attachment if the staffing position had been good and stable even though problems would have been created in the provision of the school health service and the attendance of the health visitors at the several hospital out-patient clinics where they act as liaison officers between the hospital and patients at home. For these reasons, therefore, it was decided that whilst every endeavour would be made for the staff to liaise with general practitioners there would not be complete attachment.

The health visitors have taken student nurses with them on the district and to various clinics and shown them the role of the social services provided by the local authority, and this aspect of training does much to improve the relationship between the nurses in hospital and the public health nurses.

A summary of visits by the health visiting staff during 1967 was as follows:-

(1)	Number of children under 5 years of age visited during the year	3185
(2)	Visits to children born in 1967:	
	(a) First visits	841
	(b) Total visits	2409
(3)	Total visits to children born in 1966. ...	1864
(4)	Total visits to children born in 1962-65..	2465
(5)	Total visits to persons over the age of 65 years	683
(6)	Visits to mentally disordered persons ...	71
(7)	Total of all visits to all types of cases.	8770
(8)	Number of ineffectual visits... ..	2568

Children Neglected or Ill-treated in Their Own Homes

Special care is given to those families within the City who are considered to be at the greatest social risk. They are kept under the constant supervision of the staff of all the social service departments of the Authority and very often state agencies and voluntary organisations are also involved. To effect the best means of co-operation and to provide a clearing house for the

exchange of information and views a Co-ordinating Committee meets monthly to discuss the families to determine the best way by which the families can be assisted to overcome their problems and difficulties.

It is true to say that the attention given to these families is disproportionately large in relation to their problems, and hundreds of hours of a health visitor's or social worker's time can be spent in supervising a single family. If measured in economic terms, however, the offspring of one family need only be kept outside a home administered by the Children's Committee for the salary of the health visitor to be covered, but it is a high price to pay in view of the shortage of qualified staff who could be used for undertaking an increasing amount of work amongst the better adjusted members of our society.

HOME NURSING SERVICE (Section 25)

The establishment of 12 nurses has remained constant throughout the year and at no time has there been a staff shortage. The Health Committee continued its policy of providing Queen's training in collaboration with the Bradford City Health Department who arranged the theoretical training and two more nurses were trained during the year and obtained their National Certificates from the Ministry of Health.

The year saw a gradual increase in the use of disposable equipment, particularly syringes and sterile dressing packs, which have done much to enable the nurses to deal with an increasing number of patients without the need to increase staff.

The liaison between the general practitioners and the hospitals has been a good one, and communications with other officers working in the local authority has been maintained.

The home nursing staff have always assisted in the training of student nurses by taking them on their rounds and giving them a good insight into the social and environmental pattern of community life.

Details of visits and cases attended by the nurses during 1967 were as follows:-

Age at first visit in the year:	<u>No. of</u> <u>Individual</u> <u>patients</u>	<u>No. of</u> <u>visits paid</u> <u>to these</u> <u>patients</u>
Under 5 years of age	64	456
Between 5 and 64 years of age...	367	8975
65 years of age and over	<u>554</u>	<u>19479</u>
1967 totals...	<u>985</u>	<u>28910</u>
1966 totals...	<u>903</u>	<u>27209</u>

VACCINATION AND IMMUNISATION (Section 26)

The Ministry of Health's recommended Schedule P continued to be used during 1967.

This Schedule provides as follows:-

<u>Age</u>	<u>Visit</u>	<u>Vaccine</u>	<u>In- jection</u>	<u>Interval</u>
3 months	1	Diphtheria, Whooping Cough, Tetanus	1	4-6 weeks
	2	-do-	2	4-6 weeks
	3	-do-	3	
6 months	4	Poliomyelitis (Oral)	4	4-6 weeks
	5	-do-	5	4-6 weeks
	6	-do-	6	
18 months	7	Diphtheria, Whooping Cough, Tetanus	7	
1-2 years		Smallpox		
School entry		Poliomyelitis Diphtheria and Tetanus		
10 years or more		B.C.G.		

Type of Vaccine	Year of Birth					Others Under 16	Total Courses
	1967	1966	1965	1964	1960-63		
PRIMARY COURSES							
Diphtheria	322	318	40	12	26	4	722
Whooping Cough	322	316	39	11	22	4	714
Tetanus	322	318	40	12	26	6	724
Poliomyelitis	180	447	71	20	151	11	880
RE-INFORCING DOSES							
Diphtheria	-	131	272	42	553	4	1002
Whooping Cough	-	125	266	41	79	-	511
Tetanus	-	131	273	42	548	8	1002
Poliomyelitis	-	3	17	4	561	11	596

Vaccination against Tuberculosis

The Chest Physicians employed jointly by the Regional Hospital Board and the Authority continue to vaccinate contacts of persons suffering from Tuberculosis. The B.C.G. vaccination scheme involving school-children continued and is available to all over the age of 10, and

to students attending further educational establishments, and I am grateful to the Director of Education and to Headteachers for their most valuable co-operation.

	<u>Contact</u> <u>Scheme by</u> <u>Chest</u> <u>Physicians</u>	<u>School-</u> <u>Children</u> <u>Scheme</u>
(1) Number Skin tested	23	582
(2) Number found positive. ...	4	74
(3) Number found negative. ...	19	508
(4) Number vaccinated	25	505

Vaccination against Smallpox during 1967

Age at date of vaccination	0-3 mths	3-6 mths	6-9 mths	9-12 mths	1 year	2-4 yrs	5-15 yrs	Total
Number vaccinated	1	-	1	1	299	108	36	446
Number re-vaccinated	-	-	-	-	2	2	17	21

AMBULANCE SERVICE (SECTION 27)Staff

The establishment remained the same as in the previous year, namely the Ambulance Officer, one Clerk, four Shift Leaders, 15 Driver/Attendants and one Caretaker/Handyman. During the year 218 days were lost owing to sickness, an increase of 80 days over the previous year, and 65 days above the total for 1965. This increased sickness was responsible for the increase in overtime having to be worked.

Training

Training proceeded satisfactorily and was geared to the syllabuses recommended in the Appendices to the Report of the Working Party on Ambulance Training. No Civil Defence examinations were conducted owing to the reorganisation of that service, but all personnel renewed their First Aid Certificates.

In June the Authority was again represented in the National Association of Ambulance Officers (3 Region) Competition for operational ambulance staffs held at Nottingham. The team was accompanied by several members of the Health Committee and although we did not gain first place we naturally considered ourselves to have the best team. Participation in these competitions is good for staff moral and produces a keen but friendly rivalry between neighbouring authorities and their personnel.

Vehicles and Equipment

During the year, two replacement vehicles were purchased and, in accordance with the Working Party's recommendations their exteriors were painted in acrylic white - a most distinctive colour. Both are well-equipped and the oxygen equipment is a portable light-weight unit which can be taken anywhere.

Inflatable splints introduced in 1965 are now standard equipment, and we have our own rescue equipment consisting of hacksaw, crow-bars, hammer, metal shears, assorted small hand tools and 40 foot of lashing.

Operational Statistics

On pages 35 & 36 appear summary tables giving details of work done in 1967. The summary headed "Comparison Table" has some interesting figures, for it reveals an increase in both the number of ambulance patients carried and an increase in ambulance mileage. The other figures also indicate increases but as the bulk of that work relates to the transportation of

children and adults at the Training Centre they are of no material significance.

Ambulance patients increased by 1,876 in 12 months and by 3,131 over two years. Ambulance mileage increased by 6,460 miles over 12 months and by 14,168 over two years.

COMPARISON TABLE

Classification	1967	1966	1965
Patients' Section 27	25,431	23,564	22,300
Total Patients	52,658	51,289	47,176
Mileage Section 27	100,305	93,845	86,137
Miles per patient	3.94	3.98	4.02
Training Centre	18,101	17,156	13,922
Other Miles	3,133	3,206	3,528
Total Miles	121,539	115,107	103,587
Emergency Calls	1,974	2,050	1,867
False Calls	50	19	13

A SUMMARY OF PATIENTS CONVEYED DURING 1967

Classification	Stretcher	Sitting Cases	Total All Patients
Out-patients	2,508	16,760	19,268
Discharges	248	773	1,021
Transfers	896	1,054	1,950
Acute Illnesses	848	249	1,097
Accidents	617	224	841
General Illness	877	340	1,217
Infectious	5	10	15
Mental Illness	15	7	22
Total	6,014	19,417	25,431
Training Centre	-	25,950	25,950
Others	-	1,277	1,277
Total	6,014	46,644	52,658

A SUMMARY OF MILEAGES EACH QUARTER OF 1967

Vehicle Classfcn.	Jan.-Mar.	Apr.-June	July-Sept.	Oct.-Dec.	Total Mileage
Ambulance	7,509	7,089	4,858	6,008	25,464
Dual Pur.	9,102	10,008	10,207	8,333	37,700
Car	10,152	8,158	9,583	9,248	37,141
Total	26,763	25,255	24,648	23,639	100,305
Trng. Centre	4,509	4,551	4,454	4,587	18,101
Others	455	513	409	472	1,849
Midwives	319	266	357	342	1,284
Totals	32,046	30,585	29,868	29,040	121,539

A SUMMARY OF JOURNEYS EACH QUARTER OF 1967

Vehicle Classfcn.	Jan.-Mar.	Apr.-June	July-Sept.	Oct.-Dec.	Total Journeys
Ambulance	493	513	373	451	1830
Dual Pur.	420	480	608	563	2071
Car	402	367	396	344	1509
Totals	1,315	1,360	1,377	1,368	5410
Trng. Centre	290	271	218	288	1067
Others	40	68	35	54	197
Midwives	64	60	67	69	260
Totals	1,709	1,759	1,697	1,769	6934

Vehicle Maintenance Workshops

The servicing of all Health Department vehicles and many from other Departments was routinely carried out

in 1967 and a breakdown of work is given in the table below.

The labour costs increased by almost £1,000 but this was due entirely to the introduction of an economic labour charge of 17/6d. per hour with effect from 1st April, in place of the old rates of 9/5d. per hour for the Mechanic and 8/6d. per hour for the Assistant Mechanic. Twenty-four working days were lost owing to sickness, compared with twenty-eight days in the previous year.

The following table shows how the work jobs were allocated:-

Depart- ment	Number of Vehicles	Man Hours		Total	Cost		
		Mechanic	Assistant		£	s	d
					£	s	d
Ambulance	11	1023	814	1837	1442	3	0
Home Nursing	5	90	108	198	151	14	9
Health	1	68	46	114	90	18	0
Education	2	51	58	109	79	14	7
Parks & Cemeteries	4	199	167	366	283	0	7
W.R.V.S.	1	54	44	98	74	8	9
Welfare	2	58	67	125	91	0	8
Civil Defence	3	291	58	87	64	12	5
Weights & Measures	1	45	26	71	55	6	4
Total - 1967	30	1617	1388	3005	2332	19	1
Total - 1966	31	1516	1591	3107	1392	10	11

Labour cost per vehicle per year - 1967 ..£77.15. 3d.

Labour cost per vehicle per year - 1966 ..£44. 5. 6d.

PREVENTION OF ILLNESS, CARE AND AFTER-CARE (Section 28)

(This section of the National Health Service Act overlaps the provisions of all the other sections previously mentioned, and also Section 51 - Mental Health Act.)

Prevention of Tuberculosis and the After-care of Tuberculosis Patients

Matters affecting the care and after-care of tuberculosis patients are dealt with by the Health Committee which the Chest Physician attends when matters affecting the patients are being discussed.

Free milk is supplied to patients suffering from Tuberculosis on the recommendation of the Chest Physician, but at the close of the year only two patients were receiving milk.

The Health Committee has the letting of 26 houses which were specially built in the thirties for the re-housing of patients suffering from tuberculosis or other serious chest conditions whose accommodation is unsatisfactory, and during the year three families were re-housed.

A report on B.C.G. vaccination is given in Section 26.

Convalescent Home Treatment

The Corporation provides convalescent home treatment, usually for a period of two weeks, for those persons who are considered to be in need of a rest and are unable to meet the cost themselves. Convalescent Home Treatment is provided only on a doctor's recommendation, and the family income is taken into consideration in arriving at the charge to be borne by the recipient. During 1967, five persons benefited from the scheme.

Visit of the Mass Radiography Unit to Wakefield

The Mass Radiography Unit made its annual visit to the City during November, 1967, and the Unit's activities were again concentrated on places of employment rather than with the general public. Several firms associated with the food trade were visited in addition to a woollen mill and an engineering works.

The Director of the Unit has very kindly supplied

information concerning attendances, and the results of his findings are summarised as follows:-

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Number examined by 100 mm. film ..	1213	663	1876
Number previously examined..	840	507	1347
<u>Numbers examined by groups</u>			
Industrial groups	520	213	733
General Public	146	132	278
Teachers	74	92	166
Food Trades	398	102	500
Local Government staffs .. .	75	124	199
Totals .. .	<u>1213</u>	<u>663</u>	<u>1876</u>

Number recalled for interview with Medical Director .. .	8	6	14
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Cases of Tuberculosis

(a) referred to Chest Physician pre- sumed active .. .	2	-	2
(b) referred to Chest Physician pre- sumed inactive. .. .	2	1	3

Other abnormalities

Referred to Chest Physician for further observation.. .	4	5	9
--	---	---	---

In addition, the Unit visited H.M. Prison and examined 476 prisoners and staff, finding one active case of tuberculosis and two inactive cases.

Laundry Service and the Provision of Incontinence Pads

The demand for incontinence pads continues to increase, and annual issues now total in the region of 14,000, whilst the issue of pillow cases and sheets to elderly bed-ridden patients laundered by the Health Department rarely exceeds four patients monthly.

Chiropody Scheme

The Chiropody Treatment Scheme which commenced in April, 1960, continues to provide four free treatments in twelve months to patients falling within the priority

groups, namely:-

- (1) Men aged 65 years and over, and women aged 60 years and over.
- (2) The physically handicapped.
- (3) Expectant mothers.

Practically all persons participating in this Scheme fall within the category of elderly persons, and a continual expansion takes place as each year passes, as is indicated in the following table, which shows the numbers on the register at the close of each of the past five years:-

Number authorised to receive treatment	1967	1966	1965	1964	1963
(a) Aged persons -					
domiciliary visits ...	244	179	172	122	84
At surgery	1329	1205	1140	1032	905
(b) Physically handicapped					
Domiciliary visits ...	10	9	8	10	8
At surgery	36	30	23	26	23
(c) Expectant mothers					
Domiciliary visits ...	-	-	-	-	-
At surgery	3	-	-	1	-
	1622	1423	1343	1191	1020

Domiciliary Service for Diabetics

The Diabetic Clinic held by Dr. R. Fletcher, Consultant Physician, at Clayton Hospital, each Monday morning, is attended by a health visitor. This liaison between the hospital and the Public Health Department was established in 1958, and its aim is to provide a service to the patient so that he understands his condition and is able to cope with it.

The first interview with the patient takes place at the hospital following the patient's consultation with the Doctor. A general outline is given of the diet, method of urine testing and the administration of insulin injections. Arrangements are made to visit the patient at home where the Health Visitor is able to get down to

the business of explaining things in detail, taking into account the different circumstances presented by individual patients. For instance, those patients who take packed lunches to work obviously need a different approach to those able to have their meals at home. Hygiene and general care are also discussed, and an explanation of Diabetes itself is given. Arrangements are also made to call upon the services of a district nurse should one be required. It may be necessary to make several visits before the Health Visitor is satisfied that the patient is able to cope.

During 1967, 44 new patients attended the diabetic clinic and, in addition to visiting them at home, the Health Visitor was asked to re-visit to discuss changes in diet or insulin.

Mention must be made of the valued help and co-operation received from Sister Raggett and her staff.

Care and After-care of the Elderly

A Health Visitor attends the Out-patient Clinic at the County General Hospital to provide a liaison service with the Geriatrician and the patient at home awaiting admission to hospital; and with a patient who has been discharged from hospital or is ready for discharge. She is able to bring into use the whole range of social services, be it meals-on-wheels, home help, or provision of special equipment for handicapped persons, etc., etc.

Screening for the Prevention or Early Detection of Cancer of the Cervix

The service for the taking of cervical smears for cytological diagnostic investigation which commenced in May, 1966, was extended in October, 1967 to allow for the examination of the breasts and a pelvic examination.

During 1967, 715 women attended the Cytology Clinic at the Principal Child Welfare Centre. All but two were found negative.

Health Education

Health education means different things to many people. To the World Health Organisation the definition of health is "a state of complete physical, mental and social well-being, and not simply the absence of disease

or infirmity."

The means of achieving the dissemination of health education is placed upon our health visitors, who tackle their task as enthusiastically as their skills permit them. The full-time Health Educator is primarily concerned with the health education of people in communities, as distinct from the health visitor, who is concerned with the health education of limited numbers within her own area. The relative few within the community that the health visitor comes in contact with is the largest single obstacle to effective health education.

There is no simple answer to this problem, because the means of directing a very large audience to consider any topic affecting health is simply not available. Millions may watch a popular programme on television, but a handful of persons would probably turn up at a group discussion or to a health exhibition which may have taken days of planning. The most that can be done in such a difficult situation is for the health visitors to concentrate upon the message in the belief that resistance to their overtures will be removed as dripping water wears stone with the passing of time.

Safety in the Home

The following table shows that during 1967, 292 persons from the Wakefield City area were treated at Clayton Hospital for injuries caused by accidents at home. Of these casualties, 97 were children between the ages of 1 and 5 years, and the most common accident in this age group was the swallowing of poisonous substances. One little girl aged three years died as a result of taking tablets prescribed for her mother. Turpentine, furniture polish, and Astral cream were some of the substances ingested, as well as tablets and sleeping pills.

Particular concern is felt about the careless handling of poisons and drugs, and parents are continually being reminded that these should not be left where children can reach them. In conjunction with the Wakefield Executive Council and the Wakefield Pharmaceutical Committee, a Notice about the disposal of left-over medicines and drugs has been designed and copies sent to all chemists in the City, and to Child Welfare Centres, stressing the importance of care in the disposal of unwanted medicines.

Four elderly persons, two men and two women, died as a result of falls at home.

At a meeting of the Home Safety Advisory Council held in October, 1967, Mr. L. Boston, who had been Chairman of the Council since its inception in 1959, was thanked for his keen interest in the work of the Council. Alderman H. S. Grainger has now taken over the Chairmanship, and he presented prizes of Savings Stamps to the winners of a Schoolchildren's Poster Competition on "Home Safety". The winning posters were sent for exhibition to the National Home Safety Conference held in London in October, 1967.

In November, three children between the ages of six and nine years suffered from the effect of a firework injury, one seriously, and the mother of one of the children was also injured.

Posters and other propaganda continue to be displayed in the Welfare Clinics, and distributed to schools, and the Health Visitors on their visits to homes take every opportunity of pointing out potential dangers in the home.

HOME ACCIDENTS DEALT WITH AT CLAYTON HOSPITAL, WAKEFIELD, JANUARY TO DECEMBER, 1967

Type of Accident	All Ages		0 - 1		1 -		5 -		10-14		Total under 15 yrs		15 -		25 -		45 -		65 and over		Total aged 15 and over	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Falls	27	46	5	1	8	10	3	1	0	2	16	14	0	2	0	9	3	8	8	13	11	32
Burns and Scalds	34	27	11	12	7	4	4	1	3	3	25	20	4	0	5	4	0	2	0	1	9	7
Swallowed Poisonous Substances	26	16	3	4	22	6	1	2	0	1	26	13	0	2	0	0	0	1	0	0	0	3
Cuts from Sharp Implements	17	31	1	3	6	6	1	0	1	2	9	11	1	4	4	8	3	5	0	3	8	20
Washing Machines	1	3	0	0	0	0	1	0	0	0	1	0	0	0	0	3	0	0	0	0	0	3
Other	34	30	1	1	15	13	7	0	1	2	24	16	3	4	3	4	1	6	3	0	10	14
TOTALS	139	153	21	21	58	39	17	4	5	10	101	74	8	12	12	28	7	22	11	17	38	79
	292		42		97		21		15		175		20		40		29		28		117	

DOMESTIC HELP SERVICE (SECTION 29)

Mrs. M. Pounder, who had been our Organiser of home helps for five years, left at the end of April, 1967 and was subsequently replaced by Mrs. M. Sanderson, who commenced on the 17th July.

The total number of cases provided with home help in 1967 fell by 55 compared with the number assisted the previous year, but it is interesting to note that the number of cases provided with help in the age group 64 and under fell by 49. I think it might be assumed that the cause for the decline was due to the charge being increased from 4/- to 6/- per hour on the 13th February, 1967. The cost of home help for those in employment would almost certainly be the maximum and it is probably true to say that many found help elsewhere.

<u>Extent of Home Help Service</u>	<u>1967</u>	<u>1966</u>	<u>1965</u>
(1) Number of home helps in employment at 31st December:			
(a) Full-time	6	6	8
(b) Part-time	63	71	69
(c) All staff expressed in terms of whole time.	45.4	53.1	46.4
(2) Total hours worked by home helps... ..	94,033	93,132	93,577
(3) Visits by Organiser and staff to households..	760	1,357	1,147
(4) Analysis of cases helped:			
(i) Aged 65 and over.. ..	557	563	549
(ii) Persons under 65 years of age:-			
(a) Chronic sick and tuberculous...	25	47	60
(b) Mentally disordered	7	4	3
(c) Maternity	16	19	26
(d) Others	27	54	32
(5) Total cases helped	632	687	670

PART III

THE MENTAL HEALTH SERVICESThe Mental Health Act,
1959The National Health Service Act, 1946 (Section 51)Community Care

During 1967, 26 subnormal and 238 mentally ill patients were referred to the Mental Health Service from various sources. Compared with previous years these figures show a fairly steady number of patients referred for care. However, during the past year there has been a noticeable increase in the number of elderly people referred for admissions and care, but as there has not been the same proportionate increase in geriatric hospital beds and places in Welfare Homes, this has resulted in a lot of senile and confused people being treated as mental health problems. Perhaps the ideal way to deal with this category of patients, officially known as "Elderly Mentally Infirm", would be for them to be housed together and cared for by staff having experience in dealing with this type of condition, thus alleviating problems created in ordinary residential care.

Mental Welfare Officers visit the homes of mentally subnormal patients and mentally ill patients regularly and a close contact is maintained between the Mental Welfare Officers, Training Centre and the parents of the subnormal children who attend the Centre. Consequently such things as extra clothing for those in need, or short stay hospital care for the child whose family circumstances require it, are arranged. All mentally ill patients and parents or guardians of subnormal patients are informed that visits by the Mental Welfare Officer are not compulsory and can be discontinued if they wish it, but on the whole most patients welcome visits.

At the end of 1967 there were three patients, two male and one female, under the Guardianship of the Authority. They all attended the Adult Section of the Training Centre and all resided in Stoneville Hostel. Their financial affairs are handled by the Senior Mental Welfare Officer and they are regularly provided with clothing and encouraged to save from their Social Security

Allowance and the incentive pay they receive from the Training Centre.

The Local Authority is in close contact with the activities of the Wakefield and District Mental Health Association. Since the 1966 report the local association has increased in membership and activity, although there has been a tendency for this to be directed more towards the patient in hospital rather than the patient in the community. However, the local authority is endeavouring to remedy this. A comprehensive programme was produced and carried out by the joint efforts of the Local Authority, Hospital and local Mental Health Association during Mental Health week in June, 1967. During that week it was observed that there was an increasing awareness in young people of the problem of mental disability, and a desire to help those less fortunate than themselves; and a number of them have since visited patients in hospital.

The Senior Mental Welfare Officer gives talks and lectures to many organisations in an attempt to promote a greater understanding of mental health.

In recent months the swimming club for handicapped persons has accepted mentally handicapped children, and several young people, mainly students at Thornes House School, have regularly attended the swimming baths and assisted in the teaching of mentally handicapped children and assisted in safeguarding them whilst in the water. The club functions under the guidance of Mr. F. Broadhurst who is also the Senior Instructor at the Training Centre. It is hoped that during the next year more children from the Training Centre will be able to take advantage of these facilities and be taught to swim and thereby eliminate one further hazard from their lives.

Stoneville Hostel

At the end of 1967 there were four females and eight males in residence in the hostel which provides shelter for those people who for various reasons are not able to live in the community, and are not in need of hospital care. Apart from those attending the Training Centre and one attending the Day Centre at Stanley Royd Hospital, they are gainfully employed and in many instances my staff have been instrumental in finding them employment. Each person pays accommodation charges according to his income.

Liaison with Hospitals

There is a good relationship between the local authority staff and the hospitals, but there is a tendency for the hospital staff to use the Mental Welfare Officer as if he were still a Duly Authorised Officer operating the Mental Treatment Act, 1930, and being concerned only with the admission of patients under compulsory powers. This is contrary to their envisaged role in dealing with the admission of patients to hospital, and robs him of the opportunity of developing a good relationship as a social worker with people in the community, particularly after discharge as he comes to be regarded as the person who "takes them away". If the mental health service is to become an integral part of the social services as a whole, it is essential that mental welfare officers should be recognised as social workers, and their specialised experience used to the best advantage by other medical, social and welfare agencies.

Wakefield being the centre of a densely populated area gives mental welfare officers many opportunities to observe different kinds of treatment. In the new drug addiction regulations the local mental hospital is the centre for the treatment of drug addicts, and it is part of their after-care service to work in close co-operation with the local mental health officers.

Psychiatric Out-Patient Clinics

The mental welfare officers attend two of the weekly psychiatric out-patient clinics held in the city, one at the County and General Hospital, and the other at Pinderfields General Hospital.

The mental welfare officers assist the consultants by taking social histories from new patients and following up old patients. Visits are sometimes arranged at these sessions to patients' homes to give advice and reassurance. Where patients from other administrative areas are involved, information is passed to the mental welfare officers for that district. A fair cross-section of the community attends these clinics and from the outside there is little difference between a psychiatric out-patient clinic and any other out-patient clinic.

In 1968 when the Legal Abortion on Social Grounds Act becomes law, it is anticipated that there will be a reduction in the number of patients attending psychiatric out-patient clinics seeking therapeutic abortions on psychiatric grounds.

Welcome Club

During this last year there seems to have been a "falling off" in the attendances by the post-psychiatric patient members, but this is giving rise to no concern as it only shows that these patients are readjusting themselves to the normal social activities of the community, and fluctuations in membership and attendances are expected. It is also realised that these clubs do not do as well in urban areas as they do in rural areas, doubtless due to the lack of competition in rural areas.

The Social Club meets regularly every week and once per month a social evening is held for the adult trainees attending the Centre. Their activities include various games for which prizes are awarded, dancing, and bingo. Groups of patients from Stanley Royd Hospital come to the weekly meetings and participate in the activities. Refreshments are served at each meeting, money for these being provided by the Corporation.

During these meetings young people from various youth groups in the city call in and do their best to mix with the patients and help in any way they can.

Training Centre

The work throughout the Centre is geared to a steady progress and is forward looking. In the top class Group III - which caters for the chronological age group 13 - 16 years, there were six children, including three mongols who could read quite well. The methods used are excellent and it has been found that the Ladybird series reading books and flash cards are the best available. The Initial Teaching Alphabet has been discussed at staff meetings, but it has been decided unanimously that such good progress was being attained with Ladybird that change was not desirable. This decision was also substantiated by the fact that the Supervisor has not seen or heard of any evidence of unusual progress in Junior Training Centres where the Initial Teaching Alphabet is being used. It is considered that the translation from Initial Teaching Alphabet reading to the orthodox reading material is terribly puzzling to a child so severely subnormal as to be attending a Training Centre.

Real money is also used when teaching recognition of the value and buying power of our coinage. The children are taken to local shops where they actually see and realise what a certain amount of cash will buy

and what change to expect. Of course there is always the child whose intelligence is so impaired that he or she will never grasp this knowledge but, nevertheless, he is given the chance, and the staff try hard not to lose hope with any child. Complications of course will shortly arise with the introduction of decimal coinage.

The Health Committee recently purchased some physical education equipment, climbing, vaulting, limbering frames and balancing forms and safety mats to go with that type of equipment. It is well known that although Mongols are very rhythmical and achieve excellent results in dancing and movement to music, percussion band and chime bars, they are extremely cautious when climbing or attempting to go up or down steps. Therefore it is always a joy to see the children in the Centre negotiating the climbing equipment, etc., with such dexterity and, in most cases, lack of fear. Gone are the days when they would just follow each other like a flock of sheep all aimlessly doing the same things with no mind of their own. Now they are eager to show the teacher new ways in which they can reach their objective. Even the most handicapped child, with a little encouragement, will try and do something.

Whenever possible the children are taken to the park for Nature Study and walks of observation. The younger pupils also enjoy their visits to the swings, see-saws, and roundabouts situated in the park. Belisha Beacons and a Zebra Crossing have been provided in the playground, and these have been most beneficial in teaching road safety and safety first.

To ease the transitional period and prepare the pupils for the time when they will transfer to the Adult Section, the older pupils are taken down to the Adult Section to mix freely with the trainees and to observe them at work. Afterwards the pupils join the trainees in their mid-morning break and have a "cuppa" and a cake.

Many of the pupils have speech defects and, in conjunction with the Speech Therapist, the staff endeavour to correct these defects. Success has been achieved although progress is slow.

The children are medically inspected annually and a Health Visitor undertakes a cleanliness inspection

each term, whilst selected children are seen periodically by the Educational Psychologist.

At the beginning of the year we sent eight entries to the Annual Art Competition and Exhibition organised by the National Society for Mentally Handicapped Children, and one of our entries was considered by the five judges good enough to receive an award. The paintings from the competition were exhibited at the Leeds Art Gallery, and some of them were also shown in Bradford. They were on sale to the public and three of our paintings were sold, giving the children both a gratifying and financial reward for their efforts.

At the annual prize ceremony on the 27th September, 1967, prizes and certificates were presented to the winners who sent entries to the Crafts Competition, organised by the British Trades Alphabet Magazine (a journal published by Educational Products Ltd.). This Prize Day amalgamated with the Harvest Festival was attended by many of the parents and friends of the pupils and trainees.

November is the time when the Annual Sale of finished handwork is held. Approximately £30 was realised by the sale of children's craft mainly to parents and friends.

At Christmas a wonderful party was held, complete with the arrival of Santa Claus who distributed a gift to each child. Some of these gifts came from the Yorkshire Evening Post, and some from funds raised by the Parent/Teachers Association. A few of the children went to see the Zoo at the Queen's Hall, Leeds. One of the teachers from Manygates Secondary Modern School brought a few of his pupils to join in a short Carol Service, and afterwards, the girls from that school distributed some most professionally made soft toys to some of the younger Training Centre children. It was most gratifying to observe persons of normal intelligence taking such an interest in their less fortunate fellow beings.

Many visitors continued to attend the Centre during the year. Nurses, social workers, educationalists from this and other countries, students and senior students from several Grammar Schools, and the Centre continued to be used as a place of secondment by students taking the diploma course for teaching the mentally handicapped at Leeds and Sheffield.

New Cases Reported to Mental Health Service
during 1967

	<u>Totals</u>			
	<u>Males</u>	<u>Females</u>	<u>1967</u>	<u>1966</u>
(i) Subnormal and severely Subnormal Patients				
Reported by:-				
General Practitioners	1	-	1	-
Hospitals after discharge	-	1	1	-
Hospital after Out/Patient	1	-	1	-
Local Education Authority	4	4	8	3
Police and Courts	2	-	2	1
Others	7	6	13	6
	<u>15</u>	<u>11</u>	<u>26</u>	<u>10</u>
Number of patients under Guardianship	2	1	3	4
Subnormal persons admitted to Stoneville	2	3	5	-
Visits to homes of subnormal patients	455	559	1014	956
(ii) Mentally Ill Persons				
Reported by:-				
General Practitioners	22	28	50	58
Hospitals after discharge	26	34	60	69
Hospital after Out/Patient treatment	15	42	57	49
Police and Courts	14	5	19	18
Others	22	30	52	44
	<u>99</u>	<u>139</u>	<u>238</u>	<u>238</u>
Mentally ill persons admitted to Stoneville	2	2	4	14
Visits to homes of mentally ill persons	831	1657	2488	2351
Visits to homes of others			340	367
Patients seen in Department			214	254
Ineffectual visits			463	467

Hospital Admissions dealt with by
Mental Welfare Officers:

	<u>Totals</u>			
	<u>Males</u>	<u>Females</u>	<u>1967</u>	<u>1966</u>
Section 25 (Admission for Observation)	11	3	14	15
Section 26 (Admission for Treatment)	5	1	6	7
Section 29 (Emergency Admission)	33	27	60	54
Section 60 (Court Order)	2	-	2	1
Informal admissions	<u>22</u>	<u>42</u>	<u>64</u>	<u>81</u>
	<u>73</u>	<u>73</u>	<u>146</u>	<u>158</u>

VENEREAL DISEASES

The following report has been prepared by Mrs. E. W. Cohen, S.R.N., S.C.M. (Part 1), H.V. Cert., Queen's Nurse, Venereal Diseases Social Worker to the West Riding County Council and the City of Wakefield.

Dept. 15 at Clayton Hospital, under the direction of Dr. J. A. Burgess, is the Clinic in Wakefield for the diagnosis and treatment of Venereal and sexually transmitted diseases. Altogether there are seven sessions:- One Diagnostic Clinic to deal with patients who have no history of exposure to infection but may have signs and symptoms of possible venereal or sexually transmitted disease. Children for prospective adoption and patients with doubtful serological tests for Syphilis attend this Clinic.

Three Female Clinics - two afternoon and one evening sessions.

Three Male Clinics - two morning and one evening sessions.

The following remarks apply only to the residents in the City of Wakefield, and it will be appreciated that only part of the population avails itself of the services at Dept. 15. Because of the embarrassment many people feel when attending a Special Treatment Clinic some go to Clinics outside their home town. Also there is no data to indicate the number of patients attending General Practitioners for treatment and not referred to the Venereologist.

The number of female new patients attending the Clinic during 1967 was slightly less than in 1966, and the number of male new patients increased by one.

Teenagers

It is gratifying to note that during 1967 the number of teenage boys attending for the first time remained the same, but the number of teenage girls attending dropped by five.

The age pattern of new patients remained much the same, with the exception of an increase in the 20 to 25 years age group, both male and female.

Syphilis remains almost negligible in the City of Wakefield.

Gonorrhoea is again increasing. The number of new patients in Wakefield shown to be suffering from Gonorrhoea has risen considerably, i.e. from 11 in 1966

to 17 in 1967. This trend, however, is the pattern over the whole of the country.

Contacts

Most patients were very co-operative in arranging for their own contacts to attend for investigation. If for any reason the patient could not or would not arrange for his or her contact to attend the Clinic, the Social Worker endeavoured to do so. During 1967 this was necessary in four cases.

Defaulters

Patients who have not completed treatment or observation were requested by letter to return to the Clinic. Where the letter produced no result the Social Worker either by visiting the home or place of work endeavoured to contact the patient. This was necessary in eight cases.

Blood Tests in Pregnancy

Routine blood tests continued to be taken by Medical Officers at Ante Natal Clinics and by General Practitioners. A patient shewing a positive Blood Wasserman is usually referred to the Special Treatment Clinic for examination and treatment if necessary. During 1967 no such patient from the City of Wakefield was referred.

Cytology Tests

Early in October 1964 the practice was started in the Female Clinics at Dept. 15 of carrying out vaginal and cervical Cytology Tests on all women with genito-urinary signs or symptoms who had not previously or recently had such a test. From Wakefield 31 patients were so tested, the result of one only being found suspicious and still under consideration.

Visits made by the Social Worker

Number of visits and re-visits to Contacts	...	13
Number of visits and re-visits to defaulters...		14
Number of miscellaneous visits, Doctors,		
Hospitals, &c.	...	<u>131</u>
Total	...	<u>158</u>

PART IVEPIDEMIOLOGY

The table on page 57 shows the number of infectious diseases notified during 1967. They were few in number and call for no comment other than to say that perhaps within 12 months of writing this Report notifications of measles ought to take the same downward trend as we now experience with whooping cough, providing parents have the good sense to have their children vaccinated, and it will not be for want of trying on our part.

A baby aged 23 months was admitted to Snapethorpe Hospital where a diagnosis of food-poisoning (Cl. Welchii) was made. Enquiries revealed that the child's father was engaged in the manufacture of food, and I therefore excluded him from his place of employment in accordance with my powers under Section 41(1) of the Public Health Act, 1961. He remained off work from the 29th June to the 10th July, the Corporation paying compensation equivalent to the difference between his average wages and his entitlement to sickness benefit.

Tuberculosis

The number of primary notifications of new cases of tuberculosis during 1967 was as follows:-

Age Group in years		New Cases				Deaths			
		Pulmonary		Non- Pulmonary		Pulmonary		Non- Pulmonary	
		M	F	M	F	M	F	M	F
0 - 1		-	-	-	-	-	-	-	-
1 - 4		-	-	-	-	-	-	-	-
5 -14		-	-	-	-	-	-	-	-
15 -24		2	-	-	-	-	-	-	-
25 -44		2	-	2	1	-	-	-	-
45 -64		1	1	-	-	-	-	-	-
65 -74		2	-	-	1	-	-	-	-
75 and over		-	-	-	-	-	-	-	-
Age unknown		1	-	-	-	-	-	-	-
Totals	1967	8	1	2	2	-	-	-	-
	1966	7	5	-	1	-	1	-	-
	1965	5	2	2	-	2	-	-	-

TABLE II. INFECTIOUS DISEASES NOTIFIED DURING THE YEAR 1967
(Corresponding figures for previous 2 years appear in columns 1 & 2)

	Total all ages 1965	Total all ages 1966	Total all ages 1967	Under 1 year	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-24 years	25-34 years	35-44 years	45-64 years	65 years and over	Cases sent to hospital	Deaths
Dysentery	10	9	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Erysipelas	1	1	2	-	-	-	-	-	-	-	-	-	-	-	1	-	-
Food Poisoning	1	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-
Measles	380	821	69	5	15	11	6	15	11	4	2	-	-	-	-	-	-
Meningococcal Infection	-	1	1	-	1	-	-	-	-	-	-	-	-	-	-	1	-
Paratyphoid Fever	3	1	1	-	-	-	-	-	-	1	-	-	-	-	-	-	-
Pneumonia	3	5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Puerperal Pyrexia	12	3	9	-	-	-	-	-	-	-	5	4	-	-	-	6	-
Scarlet Fever	14	17	22	-	-	-	2	6	11	2	-	1	-	-	-	-	-
Whooping Cough	-	27	22	1	1	3	5	5	7	-	-	-	-	-	-	-	-
Totals	424	885	127	6	18	14	13	26	29	7	7	5	-	1	1	11	-
Acute Poliomyelitis	...	...	...	...	Nil	...	...	...	...	Malaria	...	...	...	...	Nil	...	...
Diphtheria	...	...	...	...	Nil	...	...	...	...	Ophthalmia Neonatorum	...	...	...	...	Nil	...	...
Encephalitis Lethargica	...	...	...	...	Nil	...	...	...	...	Pemphigus Neonatorum	...	...	...	...	Nil	...	...
Enteric Fever	...	...	...	...	Nil	...	...	...	...	Polio-encephalitis	...	...	...	...	Nil	...	...
Smallpox	...	...	...	...	Smallpox	...	...	...	...	...	...	...	...	...	...	...	Nil

PART V

REPORTS ON PUBLIC HEALTH MISCELLANEOUS SERVICES

1. National Assistance Act, 1948 - Section 47 -
Removal to Suitable Premises of Persons in
need of Care and Attention.
2. National Assistance Act, 1948 -
Incidence of Blindness
3. Staff - Medical Examinations

National Assistance Act, 1948 - Section 47
Removal to Suitable Premises of Persons in
Need of Care and Attention

No action was taken during 1967 under the powers placed on me by Section 47 of the National Assistance Act, 1948.

National Assistance Act, 1948 -
The Incidence of Blindness

The Director of Welfare Services informs me that 26 persons were admitted to the Blind Register, and 16 persons were admitted to the Partially Sighted Register during 1967. The following table shows the follow-up of registered blind and partially sighted persons.

Follow-up of Registered Blind and Partially
Sighted Persons.

Year ending 31st December 1967

	Cause of Disability			
	Cata- ract	Glau- coma	Retrolental Fibroplasia	Others
(i) Number of cases registered during the year in respect of which Forms B.D.8 recommends:				
(a) No treatment	5	2	-	12
(b) Treatment (medical, surgical or optical)	7	1	-	5
(c) Ophthalmic Medical Supervision	4	4	-	2
(ii) Number of cases at (i) (b) which have received the treatment recommended	1	-	-	1

Staff Medical Examinations

During 1967, 184 employees were examined by the Authority's Medical Officers, who determined their fitness for entry into the Council's Superannuation Scheme.

GENERAL PUBLIC HEALTH

Under this part of the report much of the routine work of the Sanitary Section is included. This covers the investigation of complaints, all housing repair work, refuse storage accommodation and rodent control, etc.

1967 has seen a most marked reduction in the rat population living in the City's sewerage system. The treatment of the sewers which commenced in 1966 has continued and the percentage of manholes which show evidence of rat infestation has been reduced from 40 per cent in 1966 to 1 $\frac{2}{3}$ per cent at the end of the year.

This figure will fluctuate in the future, but it is hoped that by continuing the present system that it can be held below 5 per cent of the total of 1,850 manholes in the City.

Although the number of surface infestations shows a slight increase, these have lessened in their severity and most are now of a very minor nature.

So far as the control of mice is concerned, some difficulties have been encountered during the year with an increased resistance to Warfarin, and it has been necessary to use a new poison on some occasions. Unfortunately it is not practical to use this new poison in the treatment of every infestation.

It is pleasing to be able to report that there has been less difficulty encountered in dealing with caravan dwellers during the year. No definite reason can be put forward for this improvement, but it might well be that the firm action taken in past years has acted as a deterrent and that the occupiers of the caravans are finding accommodation in areas where they are less harried.

COMPLAINTS

Number of complaints received 1844

This figure comprises:-

[illegible]

DETAILS OF INSPECTIONS MADE

Total number of inspections made	16074
Complaints	1113
Nuisances found	64
Re-inspection of houses under notice	357
Over-crowding	24
Re-lets and municipal applications	1179
Houses in multiple occupation	66
Improvement grants	119
Slum clearance (housing inspections)	1237
Clearance areas	237
Housing Survey	111
Bedding inspection	104
Moveable dwellings	135
Tents, vans and sheds	58
Land charges enquiries	82
Bakehouses	30
Dairies and milk distributors	83
Fish friers	54
Butchers	3
Food preparing premises	164
Food shops under Food and Drugs Act, 1955	128
Food Hygiene inspections	872
Hairdressers	114
Hawkers and open air caterers	17
Hotel and restaurant kitchens	64
Ice cream premises	129
Markets	113
Pet shops	7
Public houses and licensed premises	54
Shops Act, 1950	54
Merchandise Marks Act	1
Shops and warehouses	131
Factories with power	116
Factories without power	8
Special premises: (electricity stations, institutions, building sites, railway sheds)	3
Outworkers	2
Smoke Control Areas	993
Smoke observations - Industrial	156
Domestic	76
Atmospheric deposit stations	1500
Atmospheric pollution other visits	19
Boilerhouse inspections	15

Drainage tested	180
Drains inspected... ..	223
Domestic sanitary accommodation	44
School sanitary accommodation... ..	2
Rodent infestation.	286
Visits re filthy or verminous premises.	71
Animals (keeping of)... ..	6
Infectious disease	39
Noise nuisance	7
Offensive trades..	2
Refuse accommodation... ..	929
Plans	154
Sampling.	279
Offices, shops and Railway Premises Act	910
Accidents re Offices, Shops and Railway Premises Act... ..	8
Interviews..	545
Miscellaneous	954

Notices served

Informal notices served.	47
Informal notices complied with (including notices carried forward from 1966)... ..	32
Statutory notices served	46
Statutory notices complied with (including notices carried forward from 1966)... ..	46
Notices outstanding at end of 1967..	22
Notices served under the Wakefield Corporation Act, 1924, regarding ashbins	22

ACTION UNDER THE PUBLIC HEALTH ACT, 1936

No proceedings were taken in default of action under the Public Health Act, 1936, during the year.

NUISANCES ABATED AND DEFECTS REMEDIED

Drains

Cleaned out, re-laid or repaired... ..	91
New inspection chambers provided... ..	2
Gullies cleaned out	4

Dwelling houses

Roof repairs... ..	10
External walls rebuilt, cement rendered or re-pointed... ..	2
Internal walls re-plastered	6
Ceilings re-plastered..	2
Floors re-laid or repaired.	3

Dwelling houses (continued)

Doors renewed or repaired...	2
Fireplaces and cooking ranges renewed or repaired	9
Windows repaired or sashes re-corded ...	5
New windows fixed...	2
New eavesgutters or rain water fall pipes provided	5
Eavesgutters or rain water fall pipes cleaned out or repaired..	3
Smoky condition abated..	1
Chimney stacks or pots renewed or repaired..	4
Stairs repaired. ...	2

Water Closets

Flushing cisterns repaired or renewed...	1
New pedestal wash down pans provided ...	1
Repaired ...	4
Service pipes to flushing cisterns repaired. ...	3
Lighted and ventilated..	2

Water Supply

Service pipes repaired..	1
Sinks renewed...	1
Sink and bath waste pipes renewed, repaired or cleaned out...	1
Lavatory basins renewed. ...	2

Miscellaneous

Caravans removed ...	7
Yards and passages repaired or renewed..	1
Nuisance from keeping of animals abated. ...	3
Burning refuse abated...	2
Accumulation of manure and other refuse removed.	12

REFUSE STORAGE ACCOMMODATION

The Corporation operates a bin replacement scheme, but this only applies to houses where the owners have been formally required by notice to provide a dustbin. In these cases an annual charge, at present 3/-, is levied with the general rate.

Total number of ashbins on maintenance at the end of 1967	8707
Number of ashbins renewed at properties under the maintenance scheme during 1967... ..	476

CANAL BOATS

No canal boats were inspected during the year. The total number of boats on the register is 2, the same as last year.

OFFENSIVE TRADESOffensive Trades on the Register at the end of 1967

Tripe Boiling	1
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RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951

A total of 17 samples has been submitted to the Prescribed Analyst under the Act during 1967.

The following registrations, etc., were effected during 1967:-

Number of licences issued to manufacture rag flock	1
Number of premises registered where rag flock is used in connection with the business carried on.. ...	-
Total number of premises on register.. ...	5

WAKEFIELD CORPORATION ACT, 1938Section 154

Registration of hairdressers' and barbers' premises.

The number on the register at the end of 1967 was 83 (a decrease of 8).

RODENT CONTROL

Number of complaints investigated...	422
Operations at non-agricultural premises...	473
Operations at agricultural premises..	1
Number of survey visits ...	128
Number of sewer treatments. ...	5
Number of manholes treated. ...	5101

VERMINOUS PREMISESHydrogen Cyanide Fumigation

It was not found necessary to fumigate any properties during 1967.

Spray Disinfestation

Municipal Houses ...	5
Other than Municipal houses ..	3

FERTILISERS AND FEEDING STUFFS ACT, 1926

A total of five samples of fertilisers was taken in the manner prescribed by the Act during 1967. All the samples were reported by the Agricultural Analyst to be satisfactory.

MOVEABLE DWELLINGS (LICENSED SITES)

During the year two licences were in operation. One of these is in respect of a permanent site which has been satisfactory for several years. The second was of a temporary nature for a period of twelve months.

HOUSING ADMINISTRATION

During 1967 there has been a marked increase in the number of houses included in clearance area representations, and Wakefield is now reaching a position where only small isolated pockets of unfit properties and individual unfit houses remain to be dealt with.

In order to obtain a quick assessment of the present position a survey was carried out on the lines suggested in the Government's Circular "Our Older Homes - A Call for Action". This showed the following facts:-

Total number of houses	... ..	20,330
Number of fit houses	... ..	16,606
Number of fit but substandard houses (i.e. suitable for improvement).	... ..	1,805
Number of unfit houses (including those already being dealt with and some now demolished...	... ..	1,729
Number of unfit houses still to be dealt with ... ..	... ..	266

A survey of this type, involving as it does the use of spot checks and multiplication factors, does not enable individual properties to be located, but it is interesting to note how closely the figure of unfit houses coincides with one obtained during a review of the list of unfit houses carried out in early 1968.

During 1967 the number of houses occupied by immigrant families has increased but this has not generally given rise to any great difficulties. Many are occupying houses as family units, but others are undoubtedly changing the properties into houses-in-multi-occupation.

On inspection this latter type of house is usually found to contain a large number of beds, many of which are said not to be in use. In this latter connection it is relevant to point out that when inspections have been undertaken in the middle of the night no evidence of overcrowding has been revealed.

It is difficult to deal with the problems associated with immigrants so as to avoid allegations being made of racial discrimination. The integration of these newcomers into the general populace is made more difficult by their own inclination to congregate in certain areas, to speak their own language and retain their own customs rather than to adopt the habits of the people of Wakefield.

One can well imagine the same criticism being levelled at English people settling in a foreign land.

Clearance of unfit houses

During the year, action was taken to secure the closure or demolition of 263 houses (254 in clearance areas and 9 as individual properties). Details of the clearance areas represented are as follows:-

<u>Name of Order</u>	<u>No. of houses</u>	<u>Popula- tion</u>	<u>Date of represen- tation</u>	<u>Date of Order</u>	<u>Date of Confirm- ation</u>
Alverthorpe Rd. No. 3 C.P.O.	10	24	16.2.67	7.3.67	6.9.67
Balne Lane No. 1 C.P.O.	10	19	16.2.67	7.3.67	6.9.67
Carter Street No. 1 C.P.O.	27	60	16.2.67	7.3.67	16.1.68
Greenhill Rd., No. 2 C.P.O.	8	19	16.2.67	7.3.67	2.1.68
Hilton Terrace No. 1 C.P.O.	8	25	16.2.67	7.3.67	20.9.67
Jacobs Well Lane No. 1 C.P.O.	3	11	16.2.67	7.3.67	11.1.68
Rawlings Yard No. 1 C.P.O.	2	8	16.2.67	7.3.67	18.9.67
Thornes Lane No. 22 C.P.O.	16	34	16.2.67	7.3.67	14.12.67
Thornes Lane No. 23 C.P.O.	3	3	16.2.67	7.3.67	16. 1.68
Spurr Yard No. 1 C.P.O.	3	6	16.2.67	7.3.67	18. 9.67
Stanley Road No. 3 C.P.O.	2	4	16.2.67	7.3.67	18. 9.67
Stanley Road No. 4 C.P.O.	4	4	16.2.67	7.3.67	2. 1.68
Stanley Road No. 5 C.P.O.	3	4	16.2.67	7.3.67	27. 3.68
Stanley Road No. 6 C.P.O.	2	-	16.2.67	7.3.67	Not confirmed

Stratheden Road No. 1 C.P.O.	15	17	16.2.67	7.3.67	6.9.67
Doncaster Road No. 6 C.P.O.	2	3	15.6.67	25.7.67	Under- taking given
Doncaster Road No. 7 C.P.O.	4	9	15.6.57	25.7.67	11.6.68
Elm Tree Street No. 1 C.P.O.	15	30	15.6.67	25.7.67	15.1.68
Pear Tree Street No. 1 C.P.O.	90	233	15.6.67	25.7.67	27.5.68
Selby Street No. 1 C.P.O.	19	26	15.6.67	25.7.67	29.5.68
Stanley Road No. 7 C.P.O.	8	18	15.6.67	25.7.67	5.6.68
	<u>254</u>	<u>557</u>			

Confirmation was received in respect of 14 areas represented in 1966. This affected 164 properties.

A total of 407 houses was demolished, 14 having been dealt with as individual unfit houses, the remainder being in clearance areas.

New houses erected during 1967

<u>Size of houses, i.e. number of habitable rooms</u>	<u>Total</u>	<u>Built by Corpora- tion</u>	<u>Built by private enter- prise</u>
3 rooms	104	68	36
4 rooms	196	142	54
5 rooms	112	93	23
6 rooms	12	-	12
7 rooms	1	-	1
	<u>429</u>	<u>303</u>	<u>126</u>

Houses in Multi Occupation

Total number of houses in multiple
occupation 29
Number of notices served requiring
additional services or facilities ... 13

RENT ACT, 1957

During the year no action was taken under the Rent Act, 1957, and at the end of the year 44 certificates were still operative.

CLEAN AIR ACT

1967 has seen the continuation of the Council's smoke control programme following the resumption of work in 1966. The Flanshaw No. 1 Smoke Control Order, which was made in November, 1966, was confirmed by the Minister without modification on the 17th January, 1967, to become operative on the 1st June, 1968. This affects a total of 1,214 properties. During 1967 plans were submitted for the development of two areas of open land within the City, and the Council agreed to the making of Smoke Control Orders covering these developments. This resulted in the Thornes Lane No. 1 and the Horbury Road No. 1 Smoke Control Orders being made on the 26th July, 1967, and confirmed by the Minister on the 8th November, 1967. Both of these two Orders become operative on the 1st September, 1968. At the present time the two areas include just under 400 houses but this figure will be doubled when the development is completed.

Details of the present position concerning smoke control areas within the City is given in the table in the report.

Also included in the report are two graphs showing the overall averages of pollution by sulphur dioxide and smoke from 1962 to 1966. These show a marked reduction in the amount of pollutants present and although the full figures for 1967 are not yet available it would appear that this reduction is being maintained (the dotted line shows the continuation of the graph on the figures available at the time of the preparation of this report).

It is significant that the reductions shown on the graphs apply to the invisible sulphur gases as well as soot. In the early days of smoke control one of the commonest criticisms aimed at the campaign was that whilst it was accepted that solid matter would be reduced, nothing was being done to remove the invisible pollutants, and it was suggested that the sulphur content might well increase. The figures we are now obtaining, both locally and nationally, show quite definitely that this is not the case and there is no reason to doubt that over a prolonged period a very marked improvement can be achieved in the purity, let alone the cleanliness, of the air.

Whilst the progress on the reduction of domestic smoke has accelerated it is also pleasing to report that

/the

the reduction of smoke from industrial plant has received attention. At the end of the year two boiler plants which have been troublesome in the past were in the process of being modernised, and a third, which comes under the control of the Alkali Inspector, had been fitted with mechanical stokers for a trial period. This latter plant is at a relatively small brickworks where the firing of the kiln, due to its unusual shape, poses problems which are perhaps unique.

Complaints continue to be received from time to time of smoke nuisances arising from the burning of garden refuse. The City Council have considered the free removal of garden refuse along with the domestic waste but the great increase in quantity which this would bring about has prevented this being undertaken. In these circumstances it is not possible, nor desirable, to place a ban on the burning of garden refuse, and if the goodwill and co-operation of householders can be obtained there is no reason why that portion of the garden waste which cannot be composted should not be burnt without causing nuisance or inconvenience to neighbours. To do this it is essential that the waste should be dry before it is lit and it helps if the burning can be carried out when there is sufficient wind to allow for the rapid dispersal of the smoke. The slow smouldering of garden refuse will almost always cause a nuisance.

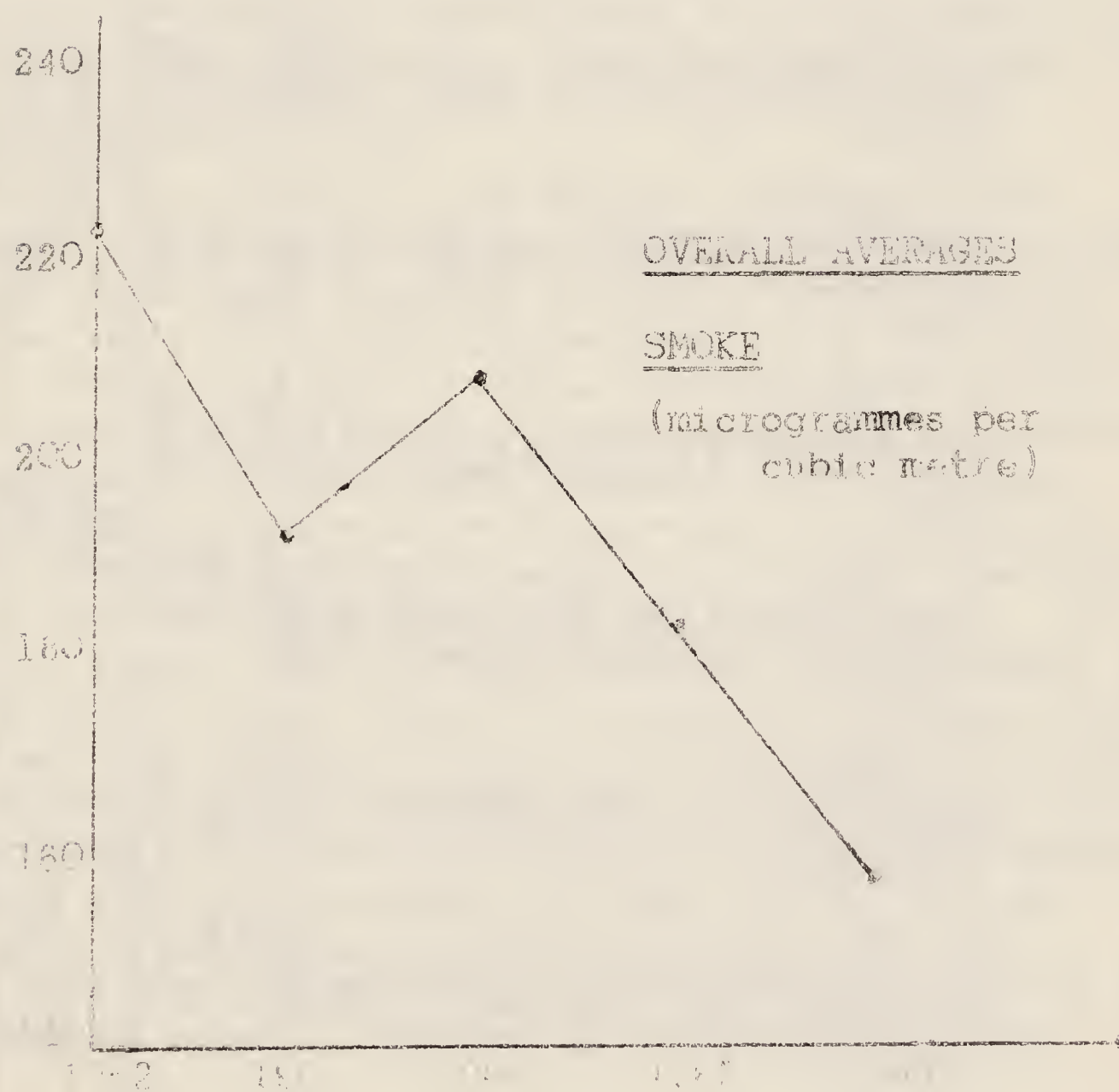
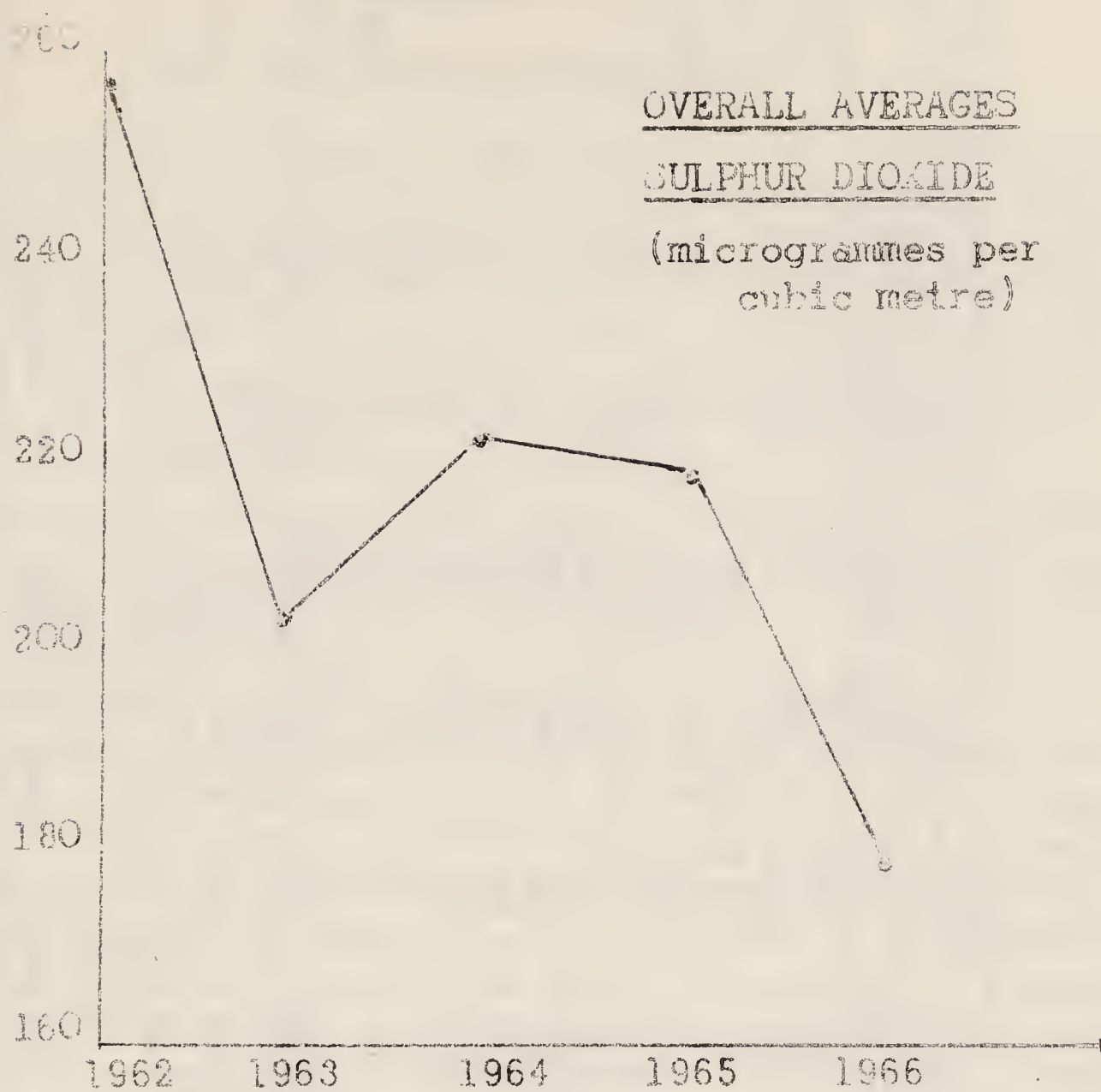
CLEAN AIR ACT - SUMMARY OF ACTION TAKEN(a) Industrial

During 1967, 156 smoke observations were taken on industrial chimneys within the City and these only revealed two contraventions of the Dark Smoke (Permitted Periods) Regulations. In both instances the contravention was brought to the notice of the management concerned and formal action was not necessary.

No notifications of intention to instal new boiler plant were received during the year, but the plans of 6 premises where variations in chimney height were being considered were examined and appropriate recommendations given.

(b) Domestic

Title	Operative date	Houses	Other Premises	Acreage
Central No. 1	1.10.60	96	174	23
Central No. 1	1. 7.62	122	147	37.75
Alverthorpe No. 1.	1. 9.62	189	10	130.5
Kettlethorpe No. 1.	1. 9.62	1	2	61.6
Eastmoor No. 1.	1. 4.63	-	-	4
Sandal No. 1.	1.11.63	373	5	353
Sandal No. 2.	1. 6.66	1312	10	616
Flanshaw No. 1.	1. 6.68	1176	38	329
Thornes Lane No. 1.	1. 9.68	185	4	90
Horbury Road No. 1.	1. 9.68	193	4	282
Total		3647	394	1926.85

APPENDIX I

National

TABLE I
Result of Volumetric Sulphur Dioxide and Air Filter Apparatus

Survey No.	of Site	C.1.	C.2	A.2	D.1E	B.3	B.3					
	Power Station (15)	Double Two Shirt Co. (17)	Stanley Street (20)	Public Hlth. Department (18)	Hall Road (19)	Kettlethorpe (21)						
Month	Smoke mg/ Cu.M	S.O ₂ mg/ Cu.M	Smoke mg/ Cu.M	S.O ₂ mg/ Cu.M	Smoke mg/ Cu.M	S.O mg/ Cu.M	Smoke mg/ Cu.M	S.O ₂ mg/ Cu.M	Smoke mg/ Cu.M	S.O ₂ mg/ Cu.M		
January	344	255	231	250	162	299	269	385	358	309	212	203
February	139	196	94	173	-	-	129	270	185	196	77	142
March	134	152	57	94	-	-	-	-	116	161	25	93
April	51	118	60	111	37	146	89	230	172	174	32	147
May	87	148	69	119	82	181	95	204	94	169	59	130
June	-	-	192	96	32	136	-	-	30	120	29	112
July	35	54	23	58	45	112	-	-	32	103	30.5	61.5
August	60	87.5	38.5	57	66	118.3	62	138	73	152	23	102
September	104	117	84.2	97.5	121	177	115	157	128	144	-	-
October	89.1	111	64.7	88.0	111	161	92.2	173	108	128	37.1	96.2
November	307	384	318	240	387	406	349	444	467	461	213	261
December	313	224	161	273	269	332	190	413	339	389	86.7	208.0
Total	1663.1	1846.5	1392.5	1656.5	1312	2068.3	1390.2	2414	2102	2506	824.3	1555.7
Average (1967)	151.2	167.9	116.1	138.1	131.2	206.8	154.3	268.0	175.1	201.0	74.9	141.4
Average (1966)	207.9	176.4	132.8	175.7	132.8	177.0	148.6	240.0	209.6	199.1	102.5	146.5

FOOD AND DRUGS ADMINISTRATION

In the absence of any major outbreak of enteric disease, work in connection with food hygiene has continued quietly but on the whole effectively. The report gives details of the samples which the City Analyst classified as unsatisfactory, but one particular incident indicates the need for the maintenance of a very high standard of vigilance on the part of food handlers throughout the whole of the manufacturing and distribution process. Complaints were received that food prepared by a company of national repute and sold from several shops was found to have been damaged during distribution. At first it was suspected that the damage was being caused by rodents at the distributor's shops. Ultimately a complaint was received where damage at this point could be completely eliminated, and consequently the distribution chain was checked further back. It was found that the goods were being packed at the manufacturing factory into distribution vehicles which were driven overnight to a depot in Yorkshire. On arrival at the depot, in order to prevent the temperature in the distribution van reaching too high a level, the ventilation openings were left open. During this period of ventilation, birds were gaining access to the vans and pecking the food through the wire baskets in which the food was contained. The covering with mesh of these ventilation openings has proved a satisfactory preventative in this case.

It is pleasing to be able to comment on the improvements which have been effected in the fish and meat market and which have resulted in a much higher standard of hygiene being attainable by the tenants of the stalls.

During the year a series of samples were taken of washing-up waters from sinks at food preparation premises throughout the City, and these revealed that in almost every instance suitable precautions were not being taken to ensure that the washing-up water was changed frequently enough or that suitable sterilants were being used. It is a matter of regret that, having obtained an improvement in any particular premise, there is a tendency for the original state of affairs to revert once the supervision is removed, but it is hoped that by regular sampling the message will be driven home, and food handlers will ensure that washing-up water is regularly changed, is kept really hot, and charged with a suitable sterilising agent. If this campaign achieves nothing else, it does at least ensure that the washing-up water is changed in premises receiving

attention as soon as a public health inspector appears on the scene.

The task of meat inspection has continued to be one of the major occupations of the public health inspectorate, and the total number of animals slaughtered during 1967 shows an increase of over 16,000 compared with the previous year, and probably represents the highest figure slaughtered within the City. No difficulties have been encountered in providing an adequate meat inspection service, but it must be emphasised that this is not a service which can be maintained on an economic basis. It is impossible to avoid inspectors waiting at the slaughterhouse for work to come through to them since the delivery to the slaughterhouse is itself subject to the vagaries of a transport service.

The improvement to which I made reference last year in the disposal of unsound food has been maintained and the incinerator purchased by this authority is working satisfactorily.

(a) REGISTRATION OF PREMISESWakefield Corporation Act, 1938Section 109 (Registration of hawkers of meat, fish, fruit or vegetables).

The number of hawkers registered at the end of 1967 was 77.

Section 110 (Registration of food preparation premises).

The number on the register at the end of 1967 was 42.

Ice Cream

During 1967, 21 applications for registration of premises under Section 110 of the Wakefield Corporation Act, 1938, were received. Some of these were in respect of changes of occupiers and the total number of premises registered was 204. Only one of the premises is used for the manufacture of ice cream, the others being for storage and sale only.

A total of 44 samples was submitted to the Public Health Laboratory for examination during the year. All the samples were subject to the Methylene Blue Test recommended by the Ministry of Health and were provisionally graded as follows:-

Total Number of samples	Provisional Grades			
	Grade 1	Grade 2	Grade 3	Grade 4
44	39 (88.63%)	2 (4.54%)	2 (4.54%)	1 (2.27%)

Milk and DairiesRegistration under the Milk and Dairies Regulations, 1959

Distributors with premises within the City 28
 Distributors with shop premises at which milk is
 supplied only in the properly closed and unopened
 vessels in which it is delivered to the shop... ..132

A total of 12 new registrations was effected during the year.

Milk (Special Designations) (General) Regulations, 1963

A total of 232 licences issued under these Regulations was in operation during 1967 and comprised the following:-

- 50 Dealers' licences authorising the use of the special designation Pasteurised.
- 151 Dealers' licences authorising the use of the special designation Sterilised.
- 30 Dealers' licences authorising the use of the special designation Untreated.
- 1 Dealer's (Pasteuriser's) licence authorising the use of the special designation Pasteurised.

(b) FOOD HYGIENE AND CONTROL

Type of Premises	Number of Premises	Number of Premises fitted to comply with Reg. 16	Number of premises to which Reg. 19 applies	Number of premises fitted to comply with Reg. 19
Grocer and Provision Dealer...	120	117	120	119
Fishmonger and Fish Fryers ...	45	45	36	36
Butcher...	39	36	39	37
Baker and Confectioner ...	27	27	27	27
Greengrocers...	10	10	10	10
Sweets and Confectionery...	45	45	40	40
Restaurants, Coffee Bars... and Factory Canteens	65	64	65	65
Public Houses, Clubs and Off-licences...	87	83	87	87

(c) FOOD EXAMINATION AND QUALITY CONTROLBacteriological Examination of Milk

During the year a total of 112 samples of milk was submitted to the Director of the Public Health Laboratory for examination.

Details of the types of milks sampled are given below:-

13 samples of Pasteurised milk, all of which passed the Phosphatase Test, but 3 failed the Methylene Blue Test.

4 samples of Sterilised milk, all of which were satisfactory.

95 samples of Untreated milk, 11 of which failed the Methylene Blue Test.

Bacteriological Examination of Other Foods

During the year, 20 samples of food were submitted to the Director of the Public Health Laboratory.

<u>Number</u>	<u>Type of food</u>	<u>Report</u>
1	Meat and Potato Pie	Satisfactory
2	Hamburger	Satisfactory
3	Raw Hamburger Sausage	Satisfactory
4	Oysters	Satisfactory
5	Mussels	Satisfactory
6	Pressed Ham	Satisfactory
7	Pressed Ham	Satisfactory
8	Sausage Rolls	Satisfactory
9	Veal, Ham and Egg Pie	Satisfactory
10	Vanilla Slices	Satisfactory
11	Fresh Cream	Satisfactory
12	Tinned Ham	Satisfactory
13	Apple Flan	Satisfactory
14	Soup Powder	Satisfactory
15	Garden Mint	Satisfactory
16	Luncheon Meat	Satisfactory
17	Roast Mutton	Satisfactory
18	Liver Sausage	Satisfactory
19	Saveloy	Satisfactory
20	Tripe Seam	Satisfactory

Bacteriological Examination of Water

During the year, 42 samples of water were submitted to the Director of the Public Health Laboratory for examination.

The samples comprised:-

	<u>Number</u>	<u>Satisfactory</u>	<u>Unsatisfactory</u>
Mains Water	1	1	-
Baths & Paddling Pools	19	18	1
Washing-up waters	20	11	9

Biological Tests for Tubercle Bacilli and Brucella Abortus

A total of 17 samples of raw milk was submitted for biological tests to determine the presence of Tubercle Bacilli and Brucella Abortus. None showed evidence of Tubercle Bacilli but one sample proved to be positive for Brucella Abortus. Enquiries revealed that this sample had been duplicated by another authority in whose area the same producer sold milk and that authority had initiated action. Details were submitted to the Ministry of Agriculture, Fisheries and Food.

Liquid Egg (Pasteurisation) Regulations, 1963

There are no egg pasteurisation plants within the City of Wakefield.

Chemical Analysis of Water

During the year four samples were submitted for chemical analysis. Two of these were reported as satisfactory.

Food and Drugs Sampling

A total of 277 samples (200 formal and 77 informal) of foods and drugs were submitted for analysis under the Food and Drugs Act during the year.

Details of the samples taken are as follows:-

Nature of Commodity(a) MilkNumber
examinedNumber
adulter-
atedAction taken on
unsatisfactory samples

165

16

Five samples contained added water (varying from a trace to 7.8 per cent) and 7 were deficient in fat content (range 2.0 per cent to 20.0 per cent deficient). Three were from a farmer who has since gone out of production, and the remainder were bulk samples. All samples were tested for the presence of antibiotics and 4 proved to be unsatisfactory in this respect (each contained 0.1 International Units of Penicillin per millilitre). Each case referred to the Ministry of Agriculture, Fisheries and Food.

(b) Other Foods

Almonds, ground 1

1

Baking powder 1

-

Beefburger 1

1 A foreign body present in a beefburger was identified as the nail of a finger nail. Warning letter sent to manufacturers.

Beer 1

1

Butter 3

-

Cakes 3

-

Cake Mixture 1

-

Cheese 3

1 This was a sample of Low Fat Cottage Cheese which contained 13.4 per cent of milk fat. Regulation 6 of the Cheese Regulations, 1965, requires "Low Fat Soft Cheese" to contain between 2 and 10 per cent milk fat, and "Medium Fat Soft Cheese" to contain between 10 per cent and 20 per cent milk fat. The term Cottage Cheese is not an approved description under the Regulations, and this product should have been described as "Medium Fat Soft Cheese". Taken up with vendors.

	<u>Number</u> <u>examined</u>	<u>Number</u> <u>adulter-</u> <u>ated</u>	<u>Action taken on</u> <u>unsatisfactory</u> <u>samples</u>
<u>Other foods (contd.)</u>			
Cherries, glace	1	-	
Cider	1	-	
Cream	2	-	
Cream of Tartar	1	-	
Curry Powder	1	-	
Dripping	1	-	
Fish Cakes	2	-	
Fish Products	1	-	
Flavouring	3	-	
Flour	2	-	
Fruit, dried	1	-	
Fruit, fresh	1	-	
Ginger, crystallised	1	-	
Gravy Mix	1	-	
Ice Cream	15	-	
Jelly, table	1	-	
Lard and cooking oil	3	-	
Lemon cheese	2	-	
Lentils	1	-	
Mayonnaise	1	-	
Meat Pie	1	1	This sample was a Steak and Kidney Pie which bore clear evidence of having been attacked by a bird or rodent. Matter taken up with manufacturers.
<u>Meat Products (Canned)</u>			
Beef Curry	1	-	
Stewed Steak	1	-	
Milk, dried	1	1	This sample was submitted because of the presence of a dead fly. It is often possible to establish by means of laboratory tests the point at which contamination of a foodstuff has taken place, but it was not possible to do so in this case. Matter taken up with the manufacturers.

	<u>Number examined</u>	<u>Number Adult- erated</u>	<u>Action taken on unsatisfactory samples</u>
Milk, condensed, sweetened (canned)	1	-	
Milk shake syrup	1	-	
Mint in Vinegar	1	-	
Non-brewed condiment	1	-	
Oil, cooking	1	-	
Peas, soaked	1	-	
Pepper	1	-	
Pickles & Sauces	4	-	
Preserves	1	-	
Quick Trifle	1	-	
Rose Hip Syrup	1	-	
Sausage	9	1	This sample of sausage bore clear evidence of having been attacked by a bird or rodent. Matter taken up with manufacturers.
Soft drink	1	-	
Spice, mixed	1	-	
Spirits	3	-	
Steaklets (Frozen)	1	-	
Sugar, Demerara	1	-	
Sugar, icing	1	-	
Sunny spread	1	-	
Sweets	3	-	
Tapioca	1	-	
Tea	1	-	
Tomato paste, double concentrated	1	-	
Vegetables, fresh	1	-	
Vinegar, malt	2	-	
Wines	3	1	This was a sample of Cream Sherry which proved to have been coloured with two artificial dyes, Sunset Yellow FCF and Red 6B. Although the use of these dyes is permitted in food, genuine Sherry never contains artificial

	<u>Number examined</u>	<u>Number Adult- erated</u>	<u>Action taken on unsatisfactory samples</u>
Wines (continued)			colouring matter. Their presence suggests that this was probably a British wine, the sale of which under the unqualified description Cream Sherry constitutes a false trade description in contravention of the Merchandise Marks Act, 1887. Matter taken up with vendors and manufacturers.
Yogfruit	1	-	
<u>Drugs</u>			
Bicarbonate of Soda	1	-	
Castor Oil	1	-	
Cod Liver Oil and Malt	1	-	
Cough Mixture	2	1	This sample of Bronchial and Asthmatic Mixture was 25 per cent deficient in glycerin content. Matter taken up with manufacturers.
Indian Brandy	1	-	
Laxative preparation	1	-	
	<u>277</u>	<u>23</u>	

Laboratory facilities

The bacteriological examination of water, milk, foods and pathological specimens is carried out by the Public Health Laboratory, Wood Street, Wakefield.

Chemical analysis of foods, drugs, fertilisers and water are carried out by Mr. R. A. Dalley, F.R.I.C., who is employed as the City Analyst for Leeds and also acts for the City of Wakefield.

(d) FOOD INSPECTIONNumber of Animals Slaughtered in the City during 1967

<u>Animals</u>	<u>Private Slaughterhouses</u>
Cattle	12446
Calves	4
Pigs	44377
Sheep	39319
	<hr/>
	96146
	<hr/>

A total of 96,146 animals was slaughtered in 1967 compared with 79,451 in the previous year, an increase of 16,695.

Carcases and Offal Inspected and Condemned

	Cattle Exclu- ding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed	12054	392	4	39319	44377	-
Number inspected	12054	392	4	39319	44377	-
<u>All diseases except Tuber- culosis and Cysticerci.</u>						
Whole carcasses condemned	4	6	-	84	111	-
Carcases of which some part or organ was condemned	5992	281	-	4352	8126	-
Percentage of the number inspected affected with diseases other than Tubercu- losis and Cysticerci	49.59	73.2	-	11.22	18.62	-
<u>Tuberculosis only</u>						
Whole carcasses condemned	-	-	-	-	-	-
Carcases of which some part or organ was condemned	-	-	-	-	161	-
Percentage of the number inspect- ed affected with tubercu- losis	-	-	-	-	.364	-

	Cattle exclu- ding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
<u>Cysticerici.</u>						
Carcases of which some part or organ was condemned	9	-	-	-	-	-
Carcases sub- mitted to treat- ment by refrigeration	9	-	-	-	-	-
Generalised and totally condemned	-	-	-	-	-	-

Meat and offal condemned at the private slaughter-
houses - 47 tons 7 cwt. 2 qrs. 1 st. 8 lb.

Slaughter of Animals Act, 1958

A total of 25 licences to slaughter or stun animals
was issued during 1967. Thirty of the licences were
renewals and two were new licences.

Poultry Inspection

There are no poultry processing premises within the
City.

Inspection of other Food

	Tons	cwt.	qrs.	st.	lbs.
Meat	-	5	1	0	7
Pastries	-	-	-	1	4
Fish	-	1	2	1	0
Bacon	-	2	3	0	10
Fruit	-	-	-	1	6
Vegetables	1	14	0	1	12
Coconut	-	-	3	1	2
Tomato Paste	-	-	3	1	2
Corn	-	-	-	-	1
Chicken	-	-	-	-	4
Baby Marrow	-	1	0	0	8
Salmon	-	-	-	-	1
Sausage	-	-	-	-	5
.	2	6	1	1	3

Inspection of other Food (continued)

	<u>No. of Tins</u>	Tons	cwt.	qrs.	st.	lbs.
Meat	1365	2	11	1	0	3
Milk	14	-	-	-	-	13
Vegetables	693	-	16	1	0	4
Fruit	461	-	17	3	0	4
Fish	51	-	-	-	1	12
	<u>2584</u>	<u>4</u>	<u>5</u>	<u>2</u>	<u>1</u>	<u>8</u>
Total	2584	6	12	0	0	11

Disposal of Unsound Food

The unsound meat from the private slaughterhouses is disposed of by sale to processing contractors whose plants have been approved by this department.

All other unsound food is disposed of by incineration at the Department's own incinerator installed at the ambulance station and disinfestation centre in Brunswick Street.

PLACES OF EMPLOYMENT

The main part of the work affecting places of employment has been concerned in implementing the provisions of the Offices, Shops and Railway Premises Act of 1963.

The statistics in the report relating to the total of premises registered under the Act are now beginning to stabilize and are becoming more accurate as primary inspections are completed. It has been found that many of the premises which were the subject of the original registration forms were, in fact, outside the scope of the Act, whilst the occupiers of other premises have neglected to send in the necessary form. Despite the publicity which has been given to the need to register premises under this Act, it seems that many shopkeepers and the occupiers of offices have been unaware of their responsibilities until an Inspector visited to undertake an inspection.

It would also seem probable that this ignorance of legal requirements extends also to the employees, since very few complaints are received from employees that their working conditions are unsatisfactory.

During 1967 the commonest defects which Inspectors have found to exist in properties are as set out below:-

- Absence of first aid kits.
- Absence of thermometers.
- Defects to floors, passage and stairs.
- Unsatisfactory sanitary accommodation.
- Unsatisfactory washing facilities.
- Unsatisfactory cleanliness.

The absence of any standard of artificial lighting is still giving rise to difficulty from time to time, and it would be helpful if some definite guidance or code of practice could be given concerning this one point.

Inspection of factories has continued during the year but there is a tendency for this work to be given a low degree of priority amongst the many other matters pressing for the Inspector's attention. This is due to the relatively minor nature of the inspections carried out by the local authority inspectors, almost all major items coming under the control of the Factory Inspector.

The register of factories maintained by this

department has been checked against that kept by the Factory Inspector, and as a result of this the figures vary quite considerably from those included in the last report.

III. OUTWORKERS

Nature of work	No. of	No. of	No. of	No. of	Notices	Prosecu-
	outworkers in August list required by Section 110(1)(c)	cases of default in sending lists to the Council	prosecu- tions for failure to supply lists to the Council	instances of work in unwhole- some premises	served	tions
28						
29						

Wearing Apparel -
Making, etc.,
Cleaning and Washing

1

-

-

-

-

-

Notices from H.M. Inspector of Factories

During the year 14 notices were received from H.M. Inspector of Factories reporting contraventions of the Act.

I. INSPECTION OF FACTORIES

	Number of			
	Number on Register	Inspections	Written Notices	Occup- iers Prose- cuted
Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	7	8	-	-
Factories not included in (i) in which Section 7 is enforced by the Local Authority	320	116	6	-
Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	12	3	-	-
	339	127	6	-

11. CASES IN WHICH DEFECTS WERE FOUND

Particulars	No. of cases in which defects were found:-				Number of cases in which Prosecutions were instituted	
	Found	Remedied	to H.M. Inspector	by H.M. Inspector		
Want of cleanliness	2	-	-	-	-	-
Overcrowding	-	-	-	-	-	-
Unreasonable temperature	-	-	-	-	-	-
Inadequate ventilation	-	-	-	-	-	-
Ineffective drainage of floors	-	-	-	-	-	-
Sanitary conveniences	-	-	-	-	-	-
(a) insufficient	-	-	-	-	-	-
(b) unsuitable or defective	10	4	-	-	13	-
(c) not separate for sexes	-	-	-	-	1	-
Other offences against the Act (not including offences relating to outwork)	2	-	-	-	-	-
Totals	14	4	-	-	14	-

Offices, Shops and Railway Premises Act, 1963

Registration and General Inspections:-

Class of Premises	Number of premises registered during year	Number of registered premises at the end of the year	Number of registered premises receiving an inspection
Offices	26	207	88
Retail Shops	37	448	203
Wholesale Shops, Warehouses	1	37	22
Catering establishments open to the public, canteens	4	81	29
Fuel storage depots	-	3	-

Total number of visits of all kinds by Inspectors to registered premises under the Act 910

Reported accidents:—

	Workplace	Number report- ed	Total number investig- ated	Action recommended			No action
				Prosecu- tion	Formal Warning	Informal advice	
Offices		2	2	-	-	-	2
Retail shops		13	5	-	-	-	13
Wholesale shops, warehouses		27	4	-	-	1	26
Catering establishments open to public, canteens		9	2	-	-	-	9
Fuel storage depots		-	-	-	-	-	-
Totals		51	13	-	-	1	50

Number of applications for exemption	Nil
Number of prosecutions	Nil

ANNUAL REPORT OF THE CITY ANALYST FOR 1967

The following is a summary of the analyses made during 1967:-

Food and Drug samples	277
Fertilisers and Feeding Stuffs...	5
Water samples	5
Water for Radioactivity.. ...	12
Miscellaneous... ..	4
	<u>303</u>

The Table on pages 82-85 summarises the articles submitted for analysis under the Food and Drugs Act, 1955. The percentage of unsatisfactory samples was 8.3 per cent compared with 7.5 per cent in 1966 and 14.6 per cent in 1965.

MILK:-

The average composition of the 165 samples analysed is shown in the Table below, which, for comparison purposes, also shows the corresponding figures for 1966, together with the 1967 figures for Leeds and the minimum composition required by the Sale of Milk Regulations, 1939.

	<u>Wakefield</u>		<u>Leeds</u>	Minimum
	1967	1966	1967	Legal
Number of samples	165	92	1611	per cent
Solids-not-fat	8.66%	8.75%	8.57%	8.50%
Fat	3.81%	3.70%	3.72%	3.00%
Total Solids	12.47%	12.45%	12.29%	11.50%

15 of the 165 samples of milk analysed were unsatisfactory. Six contained added water (varying from a trace to 7.8 per cent) and seven were deficient in fat content (range 2.0 per cent to 20.0 per cent deficient).

47 samples were tested for the presence of antibiotics and four proved to be unsatisfactory in this respect (each contained 0.1 International Units of Penicillin per millilitre).

In 10 samples the solids-not-fat (which are normally present in milk in proportionally less than the fat) were found to be deficient, thereby raising a presumption that water was present. In each of these cases, the boiling point of the milk proved the water to be from natural sources (that is cows or goats) and not to have been added.

FOOD OTHER THAN MILK

6 of the 105 samples of food other than Milk were found to be unsatisfactory; 3 of these were routine samples and four originated as complaints from members of the public.

Details of the unsatisfactory samples are given on pages 82 - 85.

FERTILISERS AND FEEDING STUFFS ACT, 1926

All the five Fertilisers submitted complied with the statutory statements.

PESTICIDE SAMPLES

During the year the Wakefield Authority submitted its first samples under the National Pesticide Survey, which is jointly sponsored by the Ministry of Agriculture, Fisheries and Food, the Local Authorities Associations, and the Association of Public Analysts.

The number of samples submitted by each participating Authority is calculated in proportion to its population, and the type of sample is prescribed so that the survey as a whole is statistically representative of the average diet of the population.

Traces of Pesticide were present in all three of the Wakefield samples, details being as follows:-

Potatoes (Cyprus)		contained DDT	430	parts per	
				thousand million.	
Apples (South Africa)	"	DDT	45	"	"
Lard (American)	"	TDE	25	"	"
		and pp DDE	7	"	"

There are no legal limits for pesticide residues in this country, but by comparison with the standards in force in other countries the above levels are not excessive. The limit for DDT in potatoes, for example, varies between 1,000 and 7,000 parts per thousand million according to the country concerned.

WATER ANALYSIS

In November a letter from the Chief Medical Officer, Ministry of Health, reminded Local Authorities of the hazard which may exist when plumbo-solvent waters undergo prolonged contact with lead pipes.

A sample of water was accordingly taken from a domestic tap in Wakefield after 16½ hours contact with lead pipes. Analysis showed the lead content (0.03

parts per million) to be only one tenth of the recommended minimum under these conditions (0.3 parts per million).

A sample of drinking water taken earlier in the year also proved to be pure and wholesome.

Analysis of two samples of flood water revealed sewage pollution and hence a defective drain or sewer as the likely cause of the flooding.

One sample of Swimming Bath Water was analysed. Both the free chlorine content and the pH were below the recommended minima.

RADIOACTIVITY

Routine monitoring of the City Water was continued, samples being taken each week, and the activity being determined on the bulked monthly sample. Levels showed a further slight fall during the year, in continuance of the trend which has existed since 1963, when 'fall-out' from American and Russian Tests was at its height.

The Table below shows the average quarterly level of artificial radioactivity in each of the last four years. The highest figure recorded in the City water was 23.8 picocuries per litre in July 1963.

	1964	1965	1966	1967
<u>First Quarter</u>	13.6	9.5	5.3	5.2
<u>Second Quarter</u>	15.6	9.0	4.8	4.5
<u>Third Quarter</u>	11.9	6.6	4.8	3.2
<u>Fourth Quarter</u>	8.9	5.5	5.3	3.4
Yearly average	12.5	7.7	5.1	4.1

All results in picocuries per litre.

MISCELLANEOUS SAMPLES

Germicidal Detergent.

A proprietary product was evaluated. No exception could be taken to the formulation, but for the purpose required (sterilising equipment used to manufacture soft ice-cream) a combined detergent-steriliser is not generally satisfactory, it being more effective to use a detergent first and to follow this by a sterilising solution.

Pharmacy & Poisons Act, 1933

A sample of disinfectant was found to contain 9.5 per cent of Formaldehyde. It therefore constituted a Part II Poison under the above Act.

The Toys (Safety) Regulations, 1967 came into operation on the 1st November, 1967. In the first year the Regulations prescribe a limit of 11,000 parts per million of lead in any coating of paint on children's toys. After the 31st October 1968 this figure will be reduced to 5,000 parts per million, and a limit of 250 parts per million will be introduced for the toxic metals arsenic, antimony, barium, cadmium and chromium.

Of the two Toys submitted under the new Regulations, one was virtually free from lead, but the red paint on the other (a Sword and Scabbard made in China) contained 7,450 parts per million of lead. This level is now permissible but will not be so after the 31st October, 1968.

CONCLUSION

Once again it is a pleasure to express my gratitude to my Deputy, Mr. L. A. Perkin, for his assistance in the various problems involved in the above work, and to the Chief Public Health Inspector, Mr. W. B. Twyford and his Staff, for their most helpful co-operation throughout the year.

R. A. DALLEY, F.R.I.C.,
Public Analyst

SEWERAGE AND SEWAGE DISPOSAL

The sewerage and sewage disposal arrangements in the City are reasonably adequate. A new pumping station at Pugneys was put into commission early in 1967 and it is anticipated that the new sludge digestion scheme at the Calder Vale Water Pollution Control Works will be in operation within the next two or three months.

The Corporation have approved in principle a further scheme for modernising these works, and it is hoped that the first phase of this scheme will commence during 1968/69.

WAKEFIELD WATER, 1967

(I am grateful to the Engineer and Manager of the Wakefield and District Water Board for this Report).

1. (a) The quality of the water supplied has been satisfactory, so has the quantity.
 - (b) No contamination of the supply occurred.
 - (c) All the dwellings in the City (and hence all the population) are supplied direct to the houses.
 - (d) The Fluoride content is below 0.1 ppm F.
 2. (a) Both raw and treated waters are tested chemically and bacteriologically twice a week. In addition, analyses are all taken twice a week in the City centre.
- The raw water contains E.Coli in counts up to 18, but the treated water is of excellent quality over 99% having zero coliform counts.
- A typical chemical analysis is as follows:-

Colour	5 hazen
Alkalinity	30 p.p.m. CaCo ₃
Total Hardness	70 p.p.m. CaCo ₃
Chloride	18 p.p.m. Cl
Electrical Conductivity	110 Dionic
pH	8.3
Total Residual Chlorine	0.3 p.p.m. Cl ₂
Iron	Nil
Manganese	Nil
Aluminium	0.30 p.p.m. Al.

- (b) The supply is not liable to have a plumbo-solvent action.

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